

Jetview Electronics

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Richmond, B.C., V6V 2K4
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Toll free: 1-866-620-1520

Credit Application Form

Date:	Contact Name:	Title:
Name of Business:		
Address:		
City:	Province:	Postal Code:
Phone:	Fax:	E-mail address:
Ownership Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor		
In Business Since:		
Bank References:		
1. Name:	Account No.:	
Address:		
Phone:	Fax:	
2. Name:	Account No.:	
Address:		
Phone:	Fax:	
Trade References (industry related):		
1. Name:	Contact:	
Address:		
Phone:	Fax:	
2. Name:	Contact:	
Address:		
Phone:	Fax:	
3. Name:	Contact:	
Address:		
Phone:	Fax:	

I declare that all the above information is true, correct, and complete. I authorize you to contact any source named above to verify any data and run a credit check. I authorize all trade references, and banks to disclose to Jetview Electronics Ltd. any and all information concerning the financial and credit history of my company. I am aware that Jetview Electronics Ltd. will rely upon this information in extending credit to me. The above information may be used in collection of any debt.

Signature: _____ **Title:** _____

Print full name: _____ **Date:** _____

Note: ALL CUSTOMERS please submit a copy of business license and a copy of owner's government issued photo ID for personal information verification.