



**Customer Credit Application**

Please complete all fields. Email completed form to: Accounting@fuelhawk.ca

**Basic Information and Address:**

Legal Business Name:	_____	DBA:	_____
Bill-To Address:	_____	Phone #	_____
City:	_____	Email:	_____
Province:	_____	Postal Code:	_____
Sole Proprietor:	_____	Year Started:	_____
	Partnership:	GST #	_____
	_____	Incorporated:	_____
Bank Name:	_____	Bank Contact	_____
Bank Address:	_____	Bank Phone #	_____
	_____	Account #	_____

Amount of credit requested:	_____	Purchase Orders Required:	_____
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**Contact Information:**

Owner/CEO:	_____	Email:	_____	Ph:	_____
CEO/Controller:	_____	Email:	_____	Ph:	_____
A/P Lead	_____	Email:	_____	Ph:	_____
Email for Invoices:	_____	Email for Statements:	_____		

**Business Trade References:**

Company Name:	_____	Contact:	_____
Address:	_____	Ph #	_____
	_____	Email:	_____
Company Name:	_____	Contact:	_____
Address:	_____	Ph #	_____
	_____	Email:	_____
Company Name:	_____	Contact:	_____
Address:	_____	Ph #	_____
	_____	Email:	_____

**Agreement:**

Authorized Name:	_____	Position:	_____
Signature:	_____	Date:	_____

Invoices are due 30 days from the date of the invoice. Accounts with unpaid invoices over 60 days may be placed on Hold  
 By submitting this application, you authorize Fuelhawk Equipment Ltd. To make inquiries to bank/trade references supplied.

**FUELHAWK EQUIPMENT LTD.**

9719-113th Avenue ■ Westlock, AB ■ T7P 0A4

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 Local (780) 446-4626 
 info@fuelhawk.ca 
 www.fuelhawk.ca