



**Ultra Fuels**

679094 BC Ltd.  
39615 Lougheed Highway  
Deroche, BC V0M 1G0  
Tel: (604) 820-4887  
Fax: (604) 820-4860

**CREDIT APPLICATION**

- Corporation  
 Partnership  
 Individual

Name of Business \_\_\_\_\_ PST# \_\_\_\_\_ GST # \_\_\_\_\_  
Delivery Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Phone# \_\_\_\_\_ Cell# \_\_\_\_\_ Fax# \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Type of Business \_\_\_\_\_ Years in Business \_\_\_\_\_  
Name(s) of principal(s) \_\_\_\_\_ Phone# \_\_\_\_\_

Credit Limit you are seeking \$ \_\_\_\_\_ a month.

**Trade References**

<u>Name of Firm</u>	<u>Contact Name</u>	<u>Phone#</u>	<u>Fax#</u>
1. _____			
2. _____			
3. _____			

**AGREEMENT**

I agree Ultra Fuels may obtain at its discretion such information as it requires pertaining to the applicant's financial relations and may disclose financial information about the applicant to any credit reporting agency or to any person with whom the applicant has or proposes to have financial relations.

Additionally, if a credit account is approved for my use then I further agree as follows:

1. To pay the full amount of all invoices charged to my account according to the terms specified on the invoice or by such other terms that may be authorized.
2. To pay finance charge equivalent to 2% per month or 24% per annum on any amounts not paid in accordance with paragraph 1.
3. Ultra Fuels may cancel this agreement without notice in the event of any breach of any agreement by applicant.

Signature of Applicant \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

*ultrafuels@shawbiz.ca*