



#6 1555 Dublin Ave.  
Winnipeg, MB R3E 3M8  
Phone: (204) 775-4467  
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### Confidential Credit Application

Legal Name of Firm: \_\_\_\_\_  
Doing Business Under the Name Of: \_\_\_\_\_  
Type of Business: \_\_\_\_\_

#### Principal Business Address:

Street: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
At Present Location Since: \_\_\_\_\_ Year Business Established: \_\_\_\_\_

#### Names of Principal(s) or Owner(s):

Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____

#### Financial Information:

Bank: _____	Account: _____
Address: _____	Fax: _____
Contact: _____	Phone: _____

#### Credit Information:

Anticipated Credit Requirements: \_\_\_\_\_ / month  
Authorized Purchasing Agents: \_\_\_\_\_ Accounts Payable Contacts: \_\_\_\_\_  
1) \_\_\_\_\_ 1) \_\_\_\_\_  
2) \_\_\_\_\_ 2) \_\_\_\_\_

#### Trade References:

Name:	Street Address:	City:	Fax:
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

The Undersigned certifies that the above information is true and correct.

The Undersigned expressly agrees to pay interest at the rate of 2% per month on overdue invoices, which is an annual percentage of 24%.

Oakwood Broadcast is hereby authorized to conduct whatever investigation is necessary in reference to the above application

Date: \_\_\_\_\_ Name: \_\_\_\_\_  
Signature: \_\_\_\_\_ Title: \_\_\_\_\_

#### Office Use Only:

Date: \_\_\_\_\_ #: \_\_\_\_\_  
Approved By: \_\_\_\_\_ C.L. \_\_\_\_\_  
Remarks: \_\_\_\_\_

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