8 Technology Way SE Calgary, Alberta T3S0B2 PH: 403-279-2015 FAX: 403-279-2019

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION				
Title:				
Company name:				
Phone:	Fax:		E-mail:	
Registered company address:				
City:			Prov:	POSTAL Code:
Date business commenced:				
Sole proprietorship:	Partnership:		Corporation:	Other:
BUSINESS AND CRED			DIT INFORMATION	
Primary business address:				
City:			Prov:	POSTAL Code:
How long at current address?				
Telephone:	lephone: Fax:		E-mail:	
Bank name:				
Bank address: Phon		Phone	e:	
City:		Prov:	POSTAL Code:	
Purchaser Name:				
Purchasing Phone#:				
Estimated Annual usage \$:				
BUSINESS/TRADE REFERENCES				
Company name:				
Address:				
City:			Prov:	POSTAL Code:
Phone: Fax:			E-mail:	
Type of account:				
Company name:				
Address:				
City:			Prov:	POSTAL Code:
Phone:	hone: Fax:		E-mail:	
Type of account:				
Company name:				
Address:				
City:			Prov:	POSTAL Code:
Phone: Fax:			E-mail:	
Type of account:				
AGREEMENT				
1. All invoices are to be paid 30 days from the date of the invoice.				
2. Claims arising from invoices must be made within seven working days.				
By submitting this application, you authorize Giant Oil Tools Ltd. to make inquiries into the banking and business/trade references that you have supplied.				
SIGNATURES				
Title: Date:			Title: Date:	