iControls® Credit Application

Company Name
Owner/President's Name
A/P Contact
A/P Contact E-mail
Billing Address
Telephone
Type of Business
Date Established
GST/TIN Number

Bank Name & Branch #
Bank Address
Bank Contact
Bank Telephone

Trade Reference 1
Contact Name
Contact Email
Address
Telephone

Trade Reference 2
Contact Name
Contact Email
Address
Telephone

Trade Reference 3
Contact Name
Contact Email
Address
Telephone

Please note that all trade references must be operating companies that are not currently owned by, or have been previously owned by the applying party, or any relation thereof. As an authorized officer of this company, I hereby certify the above information is complete and accurate. This information has been freely provided with the understanding that it will be used to establish the amount and conditions of the credit to be extended to our company by iControls. Furthermore, I authorize all parties listed in this credit application to release necessary information to iControls Inc. in order to establish and verify my company's credit standing.

Name **Signature**
Date

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