

CREDIT APPLICATION

BCCI USA controlsconnection.com 7637 Porter Road Niagara Falls, NY 14304 phone: 716-298-1693

fax: 716-298-1696

BCCI CANADA controlsconnection.ca 4129 Stanley Avenue Unit #7 Niagara Falls, ON L2E 7H3

phone: 905-353-1555

Legal Business Name:				
Mailing Address:				
City:	Prov/State:		Postal Code/Zip:	
Shipping Address:				
City:	Prov/State:		Postal Code/Zip:	
Telephone No.:	Fax No.:			
EIN #: PST #		GS [*]	T #	
Sales & Use Tax # (Please Fax a Copy of Co	ertificate or Direct Pay No	otice):		
Principals/Managers:				
1.		Pho	one No:	
2.		Pho	one No:	
Comptroller/Account Contact:		Pho	one No:	
TRADE REFERENCES				
Name:		Pho	one No:	
Address:		Fax	(No:	
Name:		Pho	one No:	
Address:		Fax	(No:	
Name:		Pho	one No:	
Address:		Fax	(No:	
Nature of Firms Business:		Yea	ars in Business:	
# Employees: Annual Sales:	Estimated Annual Purchases:			
Associated Companies:				
Bank:	Contact:			
Address:		Pho	one No:	
I AM AN OFFICER AUTHORIZED TO SIGN CONNECTION INC TO OBTAIN SUCH CRE AFOREMENTIONED COMPANY, ITS AFFILIATI OF A CREDIT ACCOUNT OR FOR ANY OTHE INVOICES WILL ***TERMS ARE NET 30	EDIT REPORTS OR OTHER INF ES OR PRINCIPALS IN CONNE OR DIRECT BUSINESS REQUIR BE THE RESPONSIBILITY OF	FORMATION AS MA ECTION WITH THE REMENT. ALL COS F THE APPLICANT O	Y BE DEEMED NECESSAI ESTABALISHMENT AND N TS INCURRED TO COLLEC COMPANY.	RY ON THE MAINTENANCE CT PAST DUE
Signature:	Title:			Date: