



705-728-2460

info@sarjeants.com

15 Sarjeant Drive
Barrie, ON, L4N 4V9



Commercial Credit Application and Credit Agreement

Company Information (Applicant):			
Legal Name of Business:			
Doing Business As (A.K.A.):			
Subsidiary:	Division:	Parent Company Name:	
Type of Business:	Business Start Date:	Number of Employees:	
Structure:	Private Corporation <input type="checkbox"/>	Partnership <input type="checkbox"/>	Sole Proprietorship <input type="checkbox"/> Publicly Traded <input type="checkbox"/>
Address:			
City:	Province:	Postal Code:	
Phone No:	Fax No:		
Email Address:			
Business Location:	Owned <input type="checkbox"/>	Rented <input type="checkbox"/>	
Landlord Address (if rented):			
City:	Province:	Postal Code:	
Accounts Payable Contact Name:		Phone No:	
Accounts Payable Email Address:		Alt. Phone No:	
Principals/Officers: <i>(Please list full names of Owners, Directors, Partners or other Authorized Signing Officers)</i>			
Name:	Title:		
Home Address:			
Driver's License Number:		Date of Birth:	
Name:	Title:		
Home Address:			
Driver's License Number:		Date of Birth:	
Have Principals/Officers of the company ever been in bankruptcy proceedings:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details:			



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Credit Information: (*Bank Account numbers are Mandatory to Process Application)			
Credit Limited (monthly) Required: \$ _____ *Financial statements required for limits over \$50,000.			
Bank Name:		Bank Address:	
Transit #:	Bank #:	Account #:	Account Manager:
Business Credit References:			
*Please provide Credit References that have equal credit exposure. DO NOT list charge cards, charge accounts, or utilities			
Business Credit Reference 1:			
Contact Name:		Phone No.:	
Business Credit Reference 2:			
Contact Name:		Phone No.:	
Business Credit Reference 3:			
Contact Name:		Phone No.:	
Products and Services:			
*Please select the products and/or services that you are interested in below.			
Ready-Mix Concrete <input type="checkbox"/>	Aggregates <input type="checkbox"/>	Redi-Rock <input type="checkbox"/>	Portable Concrete <input type="checkbox"/>
HVAC <input type="checkbox"/>	Cardlock Fuel <input type="checkbox"/>	Delivered Fuel <input type="checkbox"/>	Propane <input type="checkbox"/>
			Heating Oil <input type="checkbox"/>
			Lubes <input type="checkbox"/>
For Cardlock Consumers Only. (*Please fill out this section to process the request)			
If you require more than 4 cards, please contact our office at 705.728.2460 or fuelteam@sarjeants.com			
Number of Cards Required:			
Card #1.	Card Name: _____ Product Access (select all applicable)	All Products <input type="checkbox"/> Clear Diesel <input type="checkbox"/>	Regular Gas <input type="checkbox"/> Dyed Diesel <input type="checkbox"/>
			Prem. Gas <input type="checkbox"/> DEF <input type="checkbox"/>
Card #2.	Card Name: _____ Product Access (select all applicable)	All Products <input type="checkbox"/> Clear Diesel <input type="checkbox"/>	Regular Gas <input type="checkbox"/> Dyed Diesel <input type="checkbox"/>
			Prem. Gas <input type="checkbox"/> DEF <input type="checkbox"/>
Card #3.	Card Name: _____ Product Access (select all applicable)	All Products <input type="checkbox"/> Clear Diesel <input type="checkbox"/>	Regular Gas <input type="checkbox"/> Dyed Diesel <input type="checkbox"/>
			Prem. Gas <input type="checkbox"/> DEF <input type="checkbox"/>
Card #4.	Card Name: _____ Product Access (select all applicable)	All Products <input type="checkbox"/> Clear Diesel <input type="checkbox"/>	Regular Gas <input type="checkbox"/> Dyed Diesel <input type="checkbox"/>
			Prem. Gas <input type="checkbox"/> DEF <input type="checkbox"/>
Additional comments or requests:			



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Would you like a member of our team to contact you to discuss any questions you may have about the cardlock or any other products we offer? Yes No

Credit Card Information:

Automatic Payment Withdrawal: Bank Credit Card
 Credit Card Name: _____
 Credit Card No: _____
 Expiry Date: _____ CVD _____

Please attach a copy of a void cheque if selecting auto-withdrawal from bank account.

Weekly Payment Monthly Payment

Purchases made are automatically processed on the Friday of the following week.

The Applicant agrees to the following:

This credit application relates to granting credit for an Agreement for the supply of materials and services. It shall apply to any credit granted by The Sarjeant Co. Ltd. and all other Sarjeant Co. Ltd. divisions or subsidiaries, including Custom Concrete Northern. The applicant consents to The Sarjeant Co. Ltd., obtaining credit information from reporting agencies. Applicant agrees to contractual payment terms and acknowledges that 1.5% interest per month, 19.56% interest per annum and /or collection charges will be applied on delinquent amounts. The Sarjeant Co. Ltd. reserves the right to review the Applicant's account status at any time and determine at its own discretion whether or not to supply materials and/or services. The Sarjeant Co. Ltd. shall not be held responsible for any alleged damages caused by The Sarjeant Co. Ltd. decision not to supply.

Payment Agreement:

The customer acknowledges that The Sarjeant Company Ltd. will withdraw funds from the customer's financial institution or charge the customer's credit card provider for the amounts due under the selected Payment Plans. A service charge of \$45.00 will be applied to any declined pre-authorized payment or credit card transaction. The customer understands that this agreement may be terminated at any time upon notification. However, any amounts owing for products, rentals, or services used up to the termination date will become immediately due and payable. The customer waives the requirement for pre-notification of pre-authorized debits authorized herein. I/We agree that advance notice of such debits is not required before they are processed.

Sales Rep (if known): _____

_____ Applicant understands and agrees that if they are approved for automatic delivery by the Credit department, they will lose this option if payment is late, or missed for any reason.

***Only an authorized Officer of the Company may sign this Credit Agreement.**

Print Name: _____ Title: _____

Authorized Signature: _____ Date: _____