

**BeyondTech Solutions Inc.**

Suite 300, 3665 Kingsway
 Vancouver, B.C. V5R 5W2
www.beyond-tech.com

Credit Application**PLEASE PRINT****Section 1: Business Information**

Registered Legal Name:		
Address:		
City:	Province/State:	Postal/Zip Code:
Tel#:	Fax#:	Email:
Date Business Commenced or Incorporated:		
No of Employees:	Website:	
Check One:	<input type="checkbox"/> Incorporation	<input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship
Name of Owner:	Social Insurance#:	
Address:	City:	
Accounts Payable/Bill to Contact:	TERM: Net 15 Days	
Tel#:	Email:	

Section 2 - Business Trade References

Bank:	ACCT#:	ACCT Since:
Bank Contact:	Title:	Credit Amount Requested:
Tel:	Fax:	
1. Company:	Contact Name:	
Address:		
City:	Province/State:	Postal/Zip Code:
Tel#:	Fax#:	Email:
2. Company:	Contact Name:	
Address:		
City:	Province/State:	Postal/Zip Code:
Tel#:	Fax#:	Email:
3. Company:	Contact Name:	
Address:		
City:	Province/State:	Postal/Zip Code:
Tel#:	Fax#:	Email:

BeyondTech Solutions is authorized to obtain credit reports or other information as necessary on all applicants and individuals in association with the maintenance and collection of this account or for any other legitimate business reason. Customer warrants that all information given in this application is accurate and correct.

Signature: _____ Name: _____
 Date: _____ Title: _____

PLEASE FAX CREDIT APPLICATION TO: (604) 433-0627.