



CTL LEATHER INC

**CTL Leather CTL About Us | Terms and conditions:
CUSTOMER CREDIT APPLICATION**

CUSTOMER CREDIT APPLICATION



Please see image ref 1a and 1b for the CTL Customer Credit Application.
To download the CTL Customer Credit Application PDF, [click here](#)

CTL LEATHER INC
90 Carnforth Road, Toronto, ON, M4A 2K7
Tel: 416-449-4770 Fax: 416-449-6925
www.ctlleather.com

We (or I) with this application apply for credit with CTL Leather Inc. and hereby submit the following statements knowing them to be correct.
We also understand that this information will be kept confidential.

FIRM'S NAME:PHONE #:

ADDRESS:FAX #:

(Street and/or P.O. Box)

PST #:

(City)(Province / State)(Postal / Zip)

TYPE OF BUSINESS:☐ CORPORATION☐ PARTNERSHIP☐ SOLE PROPRIETOR☐ OTHER

OWNER/MANAGER:

AP CONTACT:CONTACT EMAIL ADDRESS:

(Contact Person Regarding Payments)(Email Address of AP Contact)

CORPORATE DETAILS

DUN & BRADSTREET #:

TERMS APPLYING FOR:☐ COD☐ NET 30☐ NET 45☐ 1% 10, NET 30

CREDIT LINE REQUESTED:☐ < \$10,000☐ \$10,000 TO \$25,000☐ OVER \$25,000

HOW LONG HAVE YOU BEEN IN BUSINESS?YEARS AT CURRENT ADDRESS:

NAME OF THE BANK YOU ARE DOING BUSINESS WITH:

BANK DETAILS

BANK ADDRESS:

(Street and/or P.O. Box)(City)(Prov / State)(Postal / Zip)

BANK PHONE #:ACCOUNT #:

BANK CONTACT PERSON:PHONE #:

IMAGE REF 1A

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TRADE REFERENCES

Trade Ref #1Trade Ref #2

Address:Address:

City:Prov/State:City:Prov/State:

Post/ZipCountry:Post/ZipCountry:

Phone:Fax:Phone:Fax:

Contact Person:Contact Person:

Email:Email:

Trade Ref #3Trade Ref #4

Address:Address:

City:Prov/State:City:Prov/State:

Post/ZipCountry:Post/ZipCountry:

Phone:Fax:Phone:Fax:

Contact Person:Contact Person:

Email:Email:

COURIER / TRUCKING CONTACT:PHONE:

ACCOUNT #:FAX:

*Signature of authorizing person for above supplier references to release applicable credit information to CTL Leather. Signature of authorizing person also agrees on behalf of Company to service charges of 1.5% per month in the event the company's account becomes past due in accordance with the terms of sale.

I,of

(Owner, Partner, of Officer)(Company Name)

giveauthorization to release our credit history on

(Financial Institution)(Account Number)

to CTL Leather Inc.

(Signature)(Date)

IMAGE REF 1B