

S S ENTERPRISES – CREDIT APPLICATION

1. BUSINESS INFORMATION

Legal Business Name: _____

Operating Name (if different): _____

Business Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Business Number (BN): _____

Type of Business: Corporation / Partnership / Sole Proprietor

Years in Business: _____

2. OWNER / PRINCIPAL INFORMATION

Full Legal Name: _____

Home Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

3. PAYMENT TERMS

All invoices are due 30 days from the invoice date (Net 30).

Late payments may be charged interest at 2% per month (24% annually).

4. AGREEMENT TERMS

- Customer agrees to pay all invoices per term.
- Customer agrees to cover collection and legal costs if delinquent.

5. SIGNATURES

Business Authorized Signatory:

Name: _____

Signature: _____

Date: _____

Personal Guarantor:

Name: _____

Signature: _____

Date: _____