



## CREDIT APPLICATION

The undersigned is applying for credit with BL Intimate Apparel and agrees to abide by the terms and conditions of the Company's standard contract.

### APPLICANT INFORMATION

Legal Name of Applicant	_____	
Trade Name/ Tax Number	_____	D&B Number: _____
Address	_____ _____	Legal Status: <input type="checkbox"/> Incorporated <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship
Owner Name:	_____	Years Established: _____
Telephone No:	_____	Accounting Contact: _____
Email:	_____	Fax: _____
		Credit Limit: _____

### BANKING

Name of your Bank:	_____	
Contact Name/ Title:	_____	
Telephone No:	_____	Fax No: _____
Email Address:	_____	

Applicant hereby applies for credit and affirms financial responsibility, ability and willingness to pay invoices in accordance with published days from the date of invoice. Applicant hereby authorizes BL Intimate Apparel Canada Inc to verify and collect information on the company, including but not limited to, bank references, trade credit references, consumer and/or commercial credit reports. Applicant acknowledges that in addition to this signed application, credit approval may also require submission of financial statements and other financial instruments as BL Intimates deems necessary. All accounts approved for credit agrees to have account paid in full based on terms of 30 Days.

Claims or requests for returns of damaged product must be submitted no later than ten days after shipment. All returns must be authorized and a return authorization number will be provided.



Please send back to:  
Fax: 514-858-7252  
Email: [lwaddell@blintimates.com](mailto:lwaddell@blintimates.com)  
Att: Laurie Waddell – Credit Manager

## TRADE REFERENCES

Company Name:	_____
Contact Name:	_____
Telephone No:	_____ Fax No: _____
Email Address:	_____

Company Name:	_____
Contact Name:	_____
Telephone No:	_____ Fax No: _____
Email Address:	_____

Company Name:	_____
Contact Name:	_____
Telephone No:	_____ Fax No: _____
Email Address:	_____

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_