



**Chung Chun**  
Towels & Linen

Phone: 604.676.7918 Fax: 604.676-7929  
#1 - 455 East Kent Ave. Northside,  
Vancouver, B.C. Canada V5X 4M2  
Email: info@chungchun.bc.ca  
Web site: www.chungchun.bc.ca

**CREDIT APPLICATION**

DATE: \_\_\_\_\_  
BY MAIL:  BY FAX:   
FROM: \_\_\_\_\_

**COMPANY INFORMATION:**

Legal Company Name: \_\_\_\_\_  
Attention: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Tel: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: \_\_\_\_\_  
Length of time in business: \_\_\_\_\_  
Nature of business: \_\_\_\_\_

**COMPANY PRINCIPALS**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_

**CREDIT INFORMATION**

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_  
Account #: \_\_\_\_\_

**TRADE REFERENCES**

Name: \_\_\_\_\_ City: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_  
Name: \_\_\_\_\_ City: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_  
Name: \_\_\_\_\_ City: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Credit Amount Requested: \$ \_\_\_\_\_

All lines must be completed in order to process this application.  
The undersigned agrees that all information provided on this credit application to be complete and true.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

