

Phone: 250-590-7996 Fax: 250-5907882

BUSINESS CONTACT INFORMATION

First Name:		Last Name:		Title:	
E-mail			Phone:		Fax:
Company name:				Date business commenced:	
Registered company address:			City:	Province:	Postal Code:
<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> Partnership:	<input type="checkbox"/> Corporation:	<input type="checkbox"/> Other:		

BUSINESS & CREDIT INFORMATION

Primary business address:		City:	Province:	Postal Code:	
How long at this address?	E-mail		Phone:		Fax:
Bank name:		Phone:		Fax:	
Bank address:		City:	Province:	Postal Code:	

BUSINESS/TRADE REFERENCES

Company name:				
Company address:		City:	Province:	Postal Code:
E-mail		Phone:		Fax:
Company name:				
Company address:		City:	Province:	Postal Code:
E-mail		Phone:		Fax:
Company name:				
Company address:		City:	Province:	Postal Code:
E-mail		Phone:		Fax:

AGREEMENT

1. All invoices are to be paid within 7 days of invoicing.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize GeaZone Strategic Ecopreneur Business Group Inc. to make inquiries into the banking and business/trade references that you have supplied.
4. Please make cheques payable to GeaZone Strategic Ecopreneur Group Inc. #2 - 625 Hillside Avenue Victoria, BC V8T 1Z1

Signature

Title:	Date:
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Signature

Title:	Date:
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