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shipENERGY.com/USA 1-866-312-1314

DATE: ____/____/____

ACCOUNT OPENING REQUEST
OR
FILE REVISION

Legal name: _____

Corporation Association Other

Business name: _____

Telephone: (____)____-_____

Address: _____

Fax: (____)____-_____

E-mail : _____

Nature of Business: _____

Number of years in business: _____

Officers or Shareholders

Family Name

First Name

President: _____

Vice-president: _____

Secretary-Treasurer: _____

Accounts Payables: _____

Number of employees: _____

Sales (last 12 months): _____

(\$- in thousands)

In the case of a sole (only) owner or an individual

Name: _____

Residential Address: _____

Employer: _____

Address of the Employer: _____

S.I.N.: _____

Driver's license no: _____

Date of birth: ____/____/____

Other information

Bank: _____

Branch: _____

Account No.: _____

Telephone: (____)____-_____

References (Suppliers, Loan Agencies) / City

_____/_____

Tel.: (____)____-_____

Fax: (____)____-_____

_____/_____

Tel. : (____)____-_____

Fax : (____)____-_____

_____/_____

Tel. : (____)____-_____

Fax : (____)____-_____

Amount of foreseen monthly purchases: _____ \$

Required credit limit : _____ \$

G.S.T. No.: _____

P.S.T. No.: _____

SPECIAL AUTHORISATION

I authorize the creditor to make inquiry on me and the company which I represent and to obtain any information which the creditor will consider relevant including the disclosure of my banking information . I aslo authorize my financial institution to disclose my account balance, line of credit or any information pertaining to my account. The present also constitutes a license to communicate with thirds and to use this information, in any purposes, which the creditor will consider useful and I also authorize any thirds concerned to supply to the creditor the information this last one will ask and will consider relevant to ask.

And I signed at _____, after reading, this _____ day of _____ 20_____.

Witness

Signature authorised by the aforementioned Company

Date

Name of the representative

I declare the above-mentioned information to be true.

Signature

Name (in capital letters)

Title