STAR System International Ltd. 7465 Conway Ave., Burnaby, BC V5E 2P7 Phone: 604-438-6261 Fax: 604-438-4021

## **Application for Credit**

Company:		
Address:		City:
Province/State:		Postal / Zip Code:
Phone:	_Fax:	Cell:Partnership
Corporation Proprieto	orship	Partnership
		Date of incorporation:
Branch or Division? Address of He		
Does parent company assume all I	iabilities?Yes	No
PRINCIPALS		
	Address:	Title:
		Title:
		Title:
Bank:	Branch:	Transit #:
		Bank Phone:
CREDIT REFERENCES		
Name:	Phone:	Fax:
		Fax:
		Fax:
ACCOUNTING INFORMATION		
A/C Payable:	Ph:	Federal Tax #:
	necessary in connec	n this application is submitted to obtain such credit report ction with the establishment and maintenance of a cred
SIGNATURE (agreement of consent)	 D <i>A</i>	ATE
		e due within our terms of NET 30 DAYS. It is furthe will be added to all past due accounts which are beyon
INITIAL	No goods may be returned to S.T.A.R. System International Ltd., without prior consent in writing. All such returns shall be subject to a 25% restocking charge to cover handling expenses. Repackaging and recondition costs will be subject to a charge of 25%.	