



**CREDIT INFORMATION FORM
BUSINESS ACCOUNT ONLY**

Name _____

Address _____

City _____

Confidential: I/We the undersigned hereby certify that I/We will assume full responsibility for all utility accounts that will become owing to Brantford Power in its personal capacity or as trustee for Utility related charges for service provided to this property.

General Information: **PLEASE PRINT**

Legal Name of Firm _____ Business # _____

Name of Parent Company if subsidiary _____

Principal Business Address: Street _____

City _____ Province _____ Code _____

Phone No. _____ Fax No. _____

Type of products sold (Please describe) _____

At present location since (Date) _____ Principal Bank _____

Is business incorporated? YES NO Address _____

If yes, date incorporated _____ City _____

Do you own lease your principal place of business After Hours Contact Phone # _____

Leased from _____ Phone# _____

Names, home address and home phones of Principal(s) or Owners(s), sole proprietorship or partnership.

	Name	Address	Home Phone
1.	_____	_____	_____
2.	_____	_____	_____

Company _____

By _____ (Signature owner(s), Officer or Agent) _____ (Please print name)

Title _____ Date _____

OFFICE USE ONLY

Account No. _____

Service Address: _____

Deposit Requested: _____

Cash	<input type="checkbox"/>
Letter of Credit	<input type="checkbox"/>
Other	<input type="checkbox"/>