

I/WE MAKE APPLICATION for a credit account with the Comox Valley Regional District, and understand that if this application is approved it will constitute an agreement to pay for all invoices as rendered in accordance with their standard credit terms: Net 30 days from statement date.

The submission of this application does not commit the Comox Valley Regional District to grant credit. If credit is granted, the Comox Valley Regional District reserves the right at any time to review credit accounts and change or cancel existing credit according to their financial facilities.

Name _____ Birth Date: _____
Home Address: _____ BC Drivers License _____
City, Province _____ Phone: _____
Postal Code: _____ Home or Cell _____
Email: _____

Legal Business Name: _____
Trade Name(s): _____
Business Address: _____ Postal Code: _____
Nature of Business: _____

TYPE: ☐ Proprietorship ☐ Partnership ☐ Limited company Phone _____

PRINCIPALS: NAME RESIDENT ADDRESS

TRADE REFERENCES: (will be sent verification form)

1. _____ Phone# _____ Fax/Email: _____
2. _____ Phone# _____ Fax/Email: _____
Bank: _____ Account#: _____
Address: _____ Contact: _____

I am an officer/agent authorized to sign for the applicant company, and I have read and fully understand and accept the conditions of this application.

I hereby authorize the Comox Valley Regional District to obtain such credit information or reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement.

DATE: _____

NAME: _____ AUTHORIZED SIGNATURE: _____

The personal information collected on this form is collected under the authority of Section 26 (c) of the *Freedom of Information and Protection of Privacy Act* and will be used solely for the purpose of the processing an Application for Credit. Should you have any questions about the collection, use and protection of your personal information, please contact the Corporate Financial Officer by emailing administration@comoxvalleyrd.ca or by calling the Financial Accounting Technician at 250-334-6000.

PERSONAL GUARANTEE

COMPANY NAME: _____

ADDRESS: _____

Hereinafter called the "Customer", has requested the Comox Valley Regional District to provide the Customer with credit.

THE UNDERSIGNED individual (name and address of Guarantor(s))

Hereinafter called the "Guarantor", desires that the Comox Valley Regional District furnish the Customer with the above mentioned services that the Customer may from time to time request.

In consideration of the Comox Valley Regional District providing the Customer with above mentioned services, the Guarantor, for himself and for his personal representatives and assigns herein unconditionally guarantees to the Comox Valley Regional District, the full and complete payment, upon demand at any time of indebtedness of the Customer to the Comox Valley Regional District.

In particular in making and accepting this Guarantee, the Guarantor and the Comox Valley Regional District agree that:

- (1) The statement of the Comox Valley Regional District as to the indebtedness of the Customer shall be binding and conclusive against the Guarantor.
- (2) The Comox Valley Regional District shall not be bound to exhaust its remedies against the Customer or any other person or persons before requiring or being entitled to payment from the Guarantor.
- (3) Demands of payment by the Comox Valley Regional District or collection agency against the Guarantor, shall be sent by mail in an envelope addressed to the last known address of the Guarantor, such notice to be deemed to be received on the day following that upon which it is mailed.
- (4) This agreement and Guarantee shall extend and apply to all services presently or subsequently furnished by the Comox Valley Regional District to the Customer.
- (5) In the event of termination of this agreement by the Guarantor as provided herein, the Guarantor shall continue to be held and bound to the Comox Valley Regional District in respect to any indebtedness of the Customer that is due and payable at the date of such termination.
- (6) This Contract shall be construed in accordance with the laws of the province of British Columbia.
- (7) The undersigned acknowledges that this Guarantee has been delivered free of any conditions and that no representations have been made to the undersigned affecting the liability of the undersigned under this Guarantee save as may be specifically embodied herein and agrees that this Guarantee is in addition to and not in substitution for any other Guarantees held or which may hereafter be held by the Comox Valley Regional District.

SIGNED, SEALED AND DELIVERED by the Guarantor(s) this _____ day of _____ 20____

Guarantor(s): _____ Signature of Guarantor(s) _____

Signature of Guarantor(s) _____

in the presence of: Witness Name: _____ Occupation: _____

Address: _____

Accepted by the Comox Valley Regional District

By: _____

Position: _____

Date: _____

The personal information collected on this form is collected under the authority of Section 26 (c) of the *Freedom of Information and Protection of Privacy Act* and will be used solely for the purpose of the processing an Electronic Funds Transfer. Should you have any questions about the collection, use and protection of your personal information, please contact the Corporate Financial Officer by emailing administration@comoxvalleyrd.ca or by calling the Financial Accounting Technician at 250-334-6000.