

# Commercial Credit Application and Pre-Authorized Charge Plan Agreement

Please complete the application below. Please print.

CORPORATION      PARTNERSHIP      PROPRIETORSHIP      INDIVIDUAL  
BUSINESS TYPE (Please circle one.)

\_\_\_\_\_  
BUSINESS LEGAL NAME      TRADE NAME (IF APPLICABLE)      YEARS IN BUSINESS

\_\_\_\_\_  
BUSINESS ADDRESS      CITY, PROVINCE, POSTAL CODE

\_\_\_\_\_  
PHONE NUMBER      FAX NUMBER      EMAIL ADDRESS

\_\_\_\_\_  
ACCOUNTS PAYABLE CONTACT NAME AND TITLE      EMAIL ADDRESS

\_\_\_\_\_  
PHONE NUMBER      CELL NUMBER      FAX NUMBER

\_\_\_\_\_  
FINANCIAL INSTITUTION      ACCOUNT NUMBER

\_\_\_\_\_  
ADDRESS      CITY, PROVINCE, POSTAL CODE

\_\_\_\_\_  
ACCOUNT MANAGER      PHONE NUMBER      FAX NUMBER

**Please provide three trade references (please ensure that references given are charge accounts).**

\_\_\_\_\_  
NAME OF FIRM

\_\_\_\_\_  
ADDRESS      CITY, PROVINCE, POSTAL CODE

\_\_\_\_\_  
ACCOUNT MANAGER      PHONE NUMBER      FAX NUMBER

\_\_\_\_\_  
NAME OF FIRM

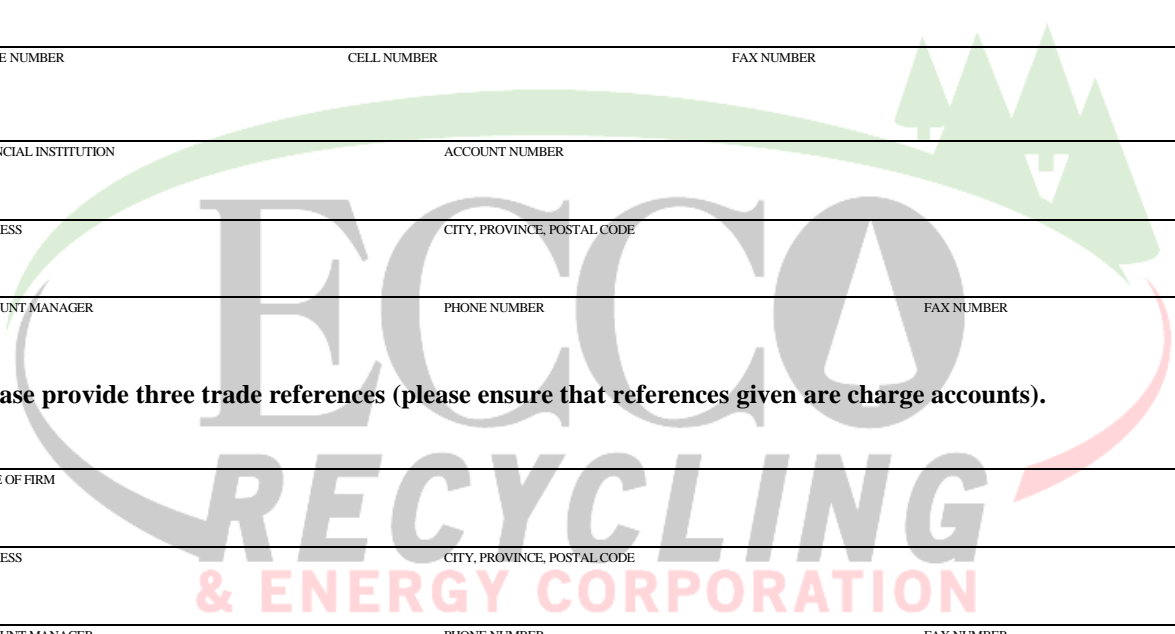
\_\_\_\_\_  
ADDRESS      CITY, PROVINCE, POSTAL CODE

\_\_\_\_\_  
ACCOUNT MANAGER      PHONE NUMBER      FAX NUMBER

\_\_\_\_\_  
NAME OF FIRM

\_\_\_\_\_  
ADDRESS      CITY, PROVINCE, POSTAL CODE

\_\_\_\_\_  
ACCOUNT MANAGER      PHONE NUMBER      FAX      NUMBER



**Please complete and sign the Authorization and Agreement below.**

## **Authorization to Collect, Use and Disclose Personal and Commercial Information**

I/We hereby authorize Ecco Recycling and Energy Corporation (Ecco) to obtain such credit reports or other information that are deemed necessary in connection with the establishment and maintenance of a credit account. Information collected from the applicant or from other sources concerning the business and/or undersigned may be disclosed to other agencies, persons or firms with whom the undersigned has or may have a business relationship. I/We hereby confirm that the information given for the purpose of obtaining credit is true and correct and it is agreed that notification will be given to Ecco of any material changes of such information.

Personal information is collected, used and protected under the Freedom of Information and Protection of Privacy Act, Section 32(c). If you have any questions about the use of this information, please contact: **Ecco Recycling and Energy Corporation** 10114 24 Street SE, Calgary, Alberta T2C 3X7 Phone: (403) 263-3226 E-mail: [credit@eccorecycling.com](mailto:credit@eccorecycling.com)

## **Terms and Conditions Agreement**

I/we agree to the following terms and conditions:

1. Payment is due immediately upon receipt of invoice. On credit card payments over \$5000.00, 2.5% processing fee will apply.
2. Ecco Recycling and Energy Corporation (Ecco) may suspend overdue or over limit accounts without notice.
3. Invoices remaining outstanding at the end of the month following invoice date will be assessed an interest charge of 2% per month (24% per annum) on the overdue amount. Accounts past due will no longer be eligible for tonnage rebates. Rebates are strictly applied to invoices on account and hold no monetary value.
4. Should the credit limit be exceeded at any time, an immediate payment will be required to reduce the balance to the level of the credit limit.
5. The account holder is liable for any and all legal costs necessary to collect monies overdue or otherwise to enforce the terms of this agreement.
6. All invoice disputes must be reported to Ecco within thirty (30) days from date of invoice.

\_\_\_\_\_  
CREDIT CARD TYPE

\_\_\_\_\_  
CARDHOLDER NAME

\_\_\_\_\_  
CREDIT CARD NUMBER

\_\_\_\_\_  
CREDIT CARD EXPIRY

\_\_\_\_\_  
CREDIT CARD VERIFICATION CODE

\$

\_\_\_\_\_  
MAXIMUM WEEKLY VARIABLE AMOUNT CHARGE

I certify that I am the account holder of the above-named credit card account and that the information provided on this form is correct and true. I authorize Ecco Recycling and Energy Corp. to begin processing charges as per my instructions for Monthly variable amount recurring payments and/or one-time payments from time to time, for payment of all charges arising under my Ecco account(s). Monthly payments for the full amount of services delivered will be charged to my specified credit card account on the first business day after the Monthly billing period. **Ecco will provide no written pre-notification of the amount of each Monthly variable amount charge.** Ecco will obtain my authorization for any other one-time or sporadic charges.

This authority is to remain in effect until Ecco has received written notification from me of its change or termination. This notification must be received at least ten (10) business days before the next charge is scheduled at the address provided below.

Ecco may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 days prior written notice to me.

I have the right to receive reimbursement for any charge that is not authorized by, or is not consistent with, this Agreement.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

\$

\_\_\_\_\_  
CREDIT LIMIT REQUESTED

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
PRINT NAME AND TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
PRINT NAME AND TITLE

\_\_\_\_\_  
DATE

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FOR OFFICE USE ONLY

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APPROVED CREDIT LIMIT

APPROVAL – AUTHORIZED SIGNATURE

PRINT NAME

DATE OF APPROVAL

**Ecco Recycling and Energy Corporation**

10114 24 Street SE, Calgary, Alberta T2C 3X7

Phone: (403) 263-3226 Fax: (403) 263-3227

E-mail: [credit@eccorecycling.com](mailto:credit@eccorecycling.com)

