

Signature

Date

Canadian Western Bank New Business Mastercard Application

Business Information			Card Information	
BUSINESS NAME & ADDRESS ABC Restaurant Inc. Restaurant Way, BC V4M4G8			CARD TYPE CWB Echelon Rewards+	BUSINESS NAME ON CARD ABC Restaurant
NATURE OF BUSINESS Food,foodservice,hospitality	BUSINESS TYPE Corporation		CREDIT LIMIT REQUESTED \$1000.00	PLAN DETAILS CWB Business
CIF NUMBER 123456	HOME BRANCH Delta		DELIVERY METHOD* ☐ [Fast Card]	* There will be a \$25 CAD fee per card for express delivery with tracking number. Fast Card option only applies to physical card deliveries and will not affect the time to process the application.
Admin(s)			Cardholder(s)	
			PRIMARY CARDHOLDER John Doe January 01, 2004 jdoe@yopmail.com 222 222 2222 Controller	
Authorization The client acknowledges that they are the Terms and Conditions in the Mast	•	astercard p	roduct to their portfolio with CWB; and th	nat they have been provided with, and agree to
	-	ement alonç	g with other relevant credit card informat	ion will be provided once your account has
Dated at		_ this	day of	, 20
SIGNER(S)			SIGNER(S)	
First and Last Name:			First and Last Name:	
Position Title:			Position Title:	
Signature	Date		Signature	Date
CWB RELATIONSHIP MANAGER			APPLICATION PREPARED BY	
First and Last Name:			Thomas Patterson	
Banking Center:			Manager, Edmonton Branch	