



# Canadian Western Bank

## New Business Mastercard Application

### Business Information

**BUSINESS NAME & ADDRESS**

Abc Eng.  
4101 Yonge Street  
Toronto, ON  
M2P2E3

**NATURE OF BUSINESS**

Engineering, Architecture

**BUSINESS TYPE**

Sole Proprietorship

**CIF NUMBER**

123456

**HOME BRANCH**

Toronto

### Card Information

**CARD TYPE**

CWB Echelon Rewards

**BUSINESS NAME ON CARD**

Abc Eng.

**CREDIT LIMIT REQUESTED**

\$15000

**CWB BUSINESS PRO PACKAGE UPGRADE**

No

\* 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.

**DELIVERY METHOD\***

☐ [Fast Card]

### Admin(s)

**Admin(full access)**

Admin One  
January 01, 2005  
adm1.abceng@yopmail.com  
234 567 8901  
Accountant

**Admin(view only)**

Admin Two  
January 01, 2005  
adm2.abceng@yopmail.com  
234 567 8901  
CA

### Cardholder(s)

**PRIMARY CARDHOLDER**

Primary Test  
January 01, 2005  
primary.abceng@yopmail.com  
234 567 8901  
Manager

**ADDITIONAL CARDHOLDER(S)**

Cardholder Test  
January 01, 2005  
card.abceng@yopmail.com  
234 567 8901  
Designer

### Alternate Mailing Instructions (within Canada and U.S. only)

### Authorization

The client acknowledges that they are agreeing to add a business Mastercard product to their portfolio with CWB.

The Canadian Western Bank Business Mastercard Cardholder Agreement along with other relevant credit card information will be provided once your account has been setup.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

**SIGNER(S)**

**First and Last Name:**

**Position Title:**

Signature

Date

**CWB RELATIONSHIP MANAGER**

**First and Last Name:**

**Banking Center:**

Signature

Date

**SIGNER(S)**

**First and Last Name:**

**Position Title:**

Signature

Date

**APPLICATION PREPARED BY**

**CWB Operator**

, Branch