

Signature

Date

## Canadian Western Bank New Business Mastercard Application

**Card Information Business Information BUSINESS NAME ON CARD BUSINESS NAME & ADDRESS CARD TYPE CWB Echelon Rewards Application Form Test Application Form Test** 123 Queen Street West, ON M5H3M9 **BUSINESS TYPE NATURE OF BUSINESS CREDIT LIMIT REQUESTED PLAN DETAILS** \$1111 Education-and-training Corporation **CWB Business** \* There will be a \$25 CAD fee per card for **CIF NUMBER HOME BRANCH DELIVERY METHOD\*** express delivery with tracking number. Fast ☐ [Fast Card] 111111 **Toronto** Card option only applies to physical card deliveries and will not affect the time to process the application. Admin(s) Cardholder(s) **PRIMARY CARDHOLDER** test primary February 01, 2005 test.primary04@yopmail.com 111 111 1111 ceo 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; and that they have been provided with, and agree to the Terms and Conditions in the Master Service Agreement. 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 day of this SIGNER(S) SIGNER(S) First and Last Name: First and Last Name: Position Title: Position Title: Date Date Signature Signature **CWB RELATIONSHIP MANAGER** APPLICATION PREPARED BY **Thomas Patterson** First and Last Name: Manager, Edmonton Branch **Banking Center:**