



# Canadian Western Bank

## New Business Mastercard Application

### Business Information

**BUSINESS NAME & ADDRESS**

CWB TRANS TEST  
777 Bay Street  
Toronto, ON  
M5B2H4

**NATURE OF BUSINESS**

Food, Foodservice, Hospitality

**BUSINESS TYPE**

Corporation

**CIF NUMBER**

123123

**HOME BRANCH**

Calgary Main

### Card Information

**CARD TYPE**

CWB Echelon Rewards+

**BUSINESS NAME ON CARD**

CWB TRANS TEST

**CREDIT LIMIT REQUESTED**

\$10000

**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  
cwb.adminone271@yopmail.com  
647 888 9911  
adm1

### Cardholder(s)

**PRIMARY CARDHOLDER**

card holder  
January 01, 2005  
cwb.cardholder271@yopmail.com  
647 888 9911  
ch

**ADDITIONAL CARDHOLDER(S)**

admin one  
January 01, 2005  
cwb.adminone271@yopmail.com  
647 888 9911  
adm1

### 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 electronically 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 CMS**

CMS, Calgary Main Branch