



# Canadian Western Bank

## New Business Mastercard Application

### Business Information

#### BUSINESS NAME & ADDRESS

Foods Inc.  
225 Simcoe Street, ON  
M5G1S4

#### NATURE OF BUSINESS

Food,foodservice,hospitality

#### BUSINESS TYPE

Corporation

#### CIF NUMBER

354334

#### HOME BRANCH

Toronto

### Card Information

#### CARD TYPE

CWB USD Business

#### BUSINESS NAME ON CARD

Foods Inc.

#### CREDIT LIMIT REQUESTED

\$15000.00

#### PLAN DETAILS

CWB Business

#### 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)

#### LEVEL 1

Adm One  
December 31, 1969  
adm1.foods@yopmail.com  
234 567 8901  
CA

### Cardholder(s)

#### PRIMARY CARDHOLDER

Prim Test  
January 01, 2005  
prim.foods@yopmail.com  
234 567 8901  
Manager

#### LEVEL 1

Aiden Hutchinson  
October 18, 1990  
aiden.hutchinson@gmail.com  
647 445 9959  
Manager

### 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 \_\_\_\_\_ 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

Thomas Patterson

Manager, Edmonton Branch