



Canadian Western Bank

New Business Mastercard Application

Business Information		Card Information	
BUSINESS NAME & ADDRESS June First Testing 3131 Boulevard Cote Vertu Ouest Unit 50 Montreal, QC H4R1Y0		CARD TYPE CWB Echelon Rewards	BUSINESS NAME ON CARD June First
NATURE OF BUSINESS Real-estate	BUSINESS TYPE Partnership	CREDIT LIMIT REQUESTED \$500	CWB BUSINESS PRO PACKAGE UPGRADE No
CIF NUMBER 123457	HOME BRANCH Calgary Main	DELIVERY METHOD* <input type="checkbox"/> [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)
Admin(full access) AdminOne WithCardholder January 01, 2005 brim.test.adminone.junefirst@yopmail.com 367 848 3267 QA	Admin(view only) AdminTwo NoCard January 01, 2005 brim.test.admintwo.junefirst@yopmail.com 765 776 7466 Admin Two	PRIMARY CARDHOLDER Primary Cardholder JuneFirst January 01, 2005 brim.test.prime.junefirst@yopmail.com 736 498 2374 CEO
		ADDITIONAL CARDHOLDER(S) Only Cardholder January 01, 2005 brim.test.crdhlder.junefirst@yopmail.com 439 089 1545 CFO Spend limit : \$10
		ADDITIONAL CARDHOLDER(S) AdminOne WithCardholder January 01, 2005 brim.test.adminone.junefirst@yopmail.com 367 848 3267 QA

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: _____	First and Last Name: _____
Position Title: _____	Position Title: _____
_____ Signature	_____ Signature
_____ Date	_____ Date
CWB RELATIONSHIP MANAGER	
APPLICATION PREPARED BY	
First and Last Name: _____	CWB CMS
Banking Center: _____	CMS, Calgary Main Branch
_____ Signature	
_____ Date	