



Canadian Western Bank

New Business Mastercard Application

Business Information

BUSINESS NAME & ADDRESS

Mills Inc
120 Bremner Boulevard
Toronto, ON
M5J0A8

NATURE OF BUSINESS

Design, Creative

BUSINESS TYPE

Sole Proprietorship

CIF NUMBER

121221

HOME BRANCH

Calgary Main

Card Information

CARD TYPE

CWB Echelon Rewards

BUSINESS NAME ON CARD

Mills Inc

CREDIT LIMIT REQUESTED

\$1111

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.

Admin(s)

Admin(full access)

Admin One
January 01, 2005
jk.admin1@yopmail.com
998 989 8989
Admin 1

Cardholder(s)

PRIMARY CARDHOLDER

Primary Cardholder
January 01, 2005
jk.primary@yopmail.com
989 898 9898
Primary

ADDITIONAL CARDHOLDER(S)

Cardholder One
January 01, 2005
jk.cardholder1@yopmail.com
212 121 2121
Cardholder 1
Spend limit : \$500

ADDITIONAL CARDHOLDER(S)

Cardholder Two
January 01, 2005
jk.cardholder2@yopmail.com
212 121 2121
Cardholder 1
Spend limit : \$22

ADDITIONAL CARDHOLDER(S)

Cardholder Three
January 01, 2005
jk.cardholder3@yopmail.com
212 121 2121
Cardholder 4
Spend limit : \$21

ADDITIONAL CARDHOLDER(S)

Cardholder Four
January 01, 2005
jk.cardholder4@yopmail.com
211 212 1221
Cardholder 4
Spend limit : \$11

ADDITIONAL CARDHOLDER(S)

Admin One
January 01, 2005
jk.admin1@yopmail.com
998 989 8989
Admin 1

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: _____

CWB RELATIONSHIP MANAGER

First and Last Name: _____

Banking Center: _____

SIGNER(S)

First and Last Name: _____

Position Title: _____

APPLICATION PREPARED BY

CWB CMS

CMS, Calgary Main Branch