

Canadian Western Bank New Business Mastercard Application

Business Information		Card Information		
BUSINESS NAME & ADDREST Testing PDF 225 Simcoe Street, ON M5G1S4	ss	CARD TYPE CWB Echelon Rewards	BUSINESS NAME ON CARD PDF	
NATURE OF BUSINESS Food,foodservice,hospitality	BUSINESS TYPE Corporation	CREDIT LIMIT REQUESTED \$5000.00	PLAN DETAILS CWB Business +	
CIF NUMBER 123123	HOME BRANCH Toronto	DELIVERY METHOD* ☐ [Fast Card]	* There will be a \$25 CAD fee per care 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)		
LEVEL 1	LEVEL 2	LEVEL 3	PRIMARY CARDHOLDER	
admin onepdf January 01, 2005 admin1.pdf@yopmail.com 123 123 1234 admin 1 job	admin twopdf January 01, 2000 admin2.pdf@yopmail.com 123 123 1234 admin 2 job	admin twoo January 01, 2000 admin22.pdf@yopmail.com 123 123 1234 twoo admin	primary pdf January 01, 2005 testing.pdf@yopmail.com 123 123 1234 PM	
		ADDITIONAL CARDHOLDER(S)	ADDITIONAL CARDHOLDER(S)	
		January 01, 2000 cm1.pdf@yopmail.com 123 123 1234 cm job	January 01, 2000 cm2.pdf@yopmail.com 123 123 1234 cm 2 job	
Alternate Mailing Instruc	ctions (within Canada and	I U.S. only)		
Authorization				
•	they are agreeing to add a busine to the Terms and Conditions in	ess Mastercard product to their port the Master Service Agreement.	folio with CWB; and that they have	
The Canadian Western Bank E provided once your account ha		Agreement along with other releva	nt credit card information will be	
Dated at	, 20	this day	of	
SIGNER(S)		SIGNER(S)		
First and Last Name:		First and Last Name:		
Position Title:		Position Title:		
Signature	Date	Signature	Date	
CWB RELATIONSHIP MANAGER		APPLICATION PREPARED I	APPLICATION PREPARED BY	
First and Last Name:		Thomas Patterson		
Banking Center:		Manager, Edmonton Branch		
Signature	Date			