



Canadian Western Bank

New Business Mastercard Application

Business Information

BUSINESS NAME & ADDRESS

Sax
1 Yonge Street
Toronto, ON
M5E1E5

NATURE OF BUSINESS

Food, Foodservice, Hospitality

BUSINESS TYPE

Corporation

CIF NUMBER

43

HOME BRANCH

Toronto

Card Information

CARD TYPE

CWB Echelon Rewards+

BUSINESS NAME ON CARD

Sa

CREDIT LIMIT REQUESTED

\$564

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

dc fd
January 01, 2005
dgs32@tfh.fdd
564 565 4645
vxdv

LEVEL 2

df fv
January 01, 2005
dgs32@tfh.fdd
787 686 5657
ffg

Cardholder(s)

PRIMARY CARDHOLDER

sca dsc
January 01, 2005
dgs32@tfh.fdd
876 654 3587
sd

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