



**CHESTER BUILDING SUPPLIES LTD**  
 3797 Hwy 3 | Chester NS | B0J 1E0  
 902-275-5512 | info@castlecbcs.com  
 www.castlecbcs.com

**NOVA SCOTIA BUILDING SUPPLIES (1982) LTD**  
 459 Hwy 235 | Blockhouse NS | B0J 1E0  
 902-624-8328 | info@castlensbs.com  
 www.castlensbs.com

## CREDIT CARD ACCOUNT APPLICATION

Date: \_\_\_\_\_  
 Credit Limit Requested: \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Civic Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Requesting credit for (please check one)      Renovation      New House      Personal      Other  
 If other please specify: \_\_\_\_\_

## TERMS OF SALE

I authorize the following individuals to purchase material on the above account:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_
- 4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## CREDIT CARD INFORMATION

I the undersigned, authorize Chester and/or Nova Scotia Building Supplies Ltd to apply to my credit card as stated below, the account balance within the first 10 days of the month following the statement date.

(Check one)      Visa      MasterCard      American Express      Castle Credit Card

For consideration received, including but not limited to the supply of goods and materials by Chester and/or Nova Scotia Building Supplies Ltd. To myself I, \_\_\_\_\_, hereby irrevocably direct (name of credit card company) \_\_\_\_\_ to honor any and all my debts to Chester and/or Nova Scotia Building Supplies Ltd Further, I hereby and authorize Chester and/or Nova Scotia Building Supplies Ltd to debit my credit card for the amount purchased by myself or the person/persons identified below, whose shall indicate my authorization.

Credit Card #: \_\_\_\_\_ Expiry: \_\_\_\_\_ CVC: \_\_\_\_\_

Signature (cardholder): \_\_\_\_\_ Date: \_\_\_\_\_

I would like to open this account in the      Blockhouse location only, in the      Chester location only, or      in both locations.  
 Please note if opening an account in both locations monthly statements are sent separately from each location and account payments are to be paid separately and to the specific location on the statement.

## STORE USE

Date: \_\_\_\_\_ Given out by: \_\_\_\_\_ Authorized by: \_\_\_\_\_

Approved Credit Limit: \_\_\_\_\_ Special Instructions: \_\_\_\_\_