

**Corporation
or Registered
Organization Form**

**CONSUMER CREDIT
INFORMATION FORM**

Office Use Only CUSTOMER ID#

CONSUMER'S FULL REGISTERED NAME							
OPERATING NAME							
SERVICE ADDRESS	MAILING ADDRESS (IF DIFFERENT THAN SERVICE)						
Business Phone #	Email:						
Date Of Incorporation: Date that Service is Required:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">For Small Businesses ONLY</td> </tr> <tr> <td colspan="2" style="text-align: center;">Electricity Pricing Plan - PLEASE CHOOSE ONE:</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> Time of Use Pricing</td> <td style="text-align: center;"><input type="checkbox"/> Tiered Pricing</td> </tr> </table>	For Small Businesses ONLY		Electricity Pricing Plan - PLEASE CHOOSE ONE:		<input type="checkbox"/> Time of Use Pricing	<input type="checkbox"/> Tiered Pricing
For Small Businesses ONLY							
Electricity Pricing Plan - PLEASE CHOOSE ONE:							
<input type="checkbox"/> Time of Use Pricing	<input type="checkbox"/> Tiered Pricing						
NAME OF SIGNING OFFICER	Position Or Title						

HEAD OFFICE ADDRESS (If Applicable)

Head Office Phone Number
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NAMES OF OTHER SIGNING OFFICERS

Name	TITLE
Name	TITLE
Name	TITLE

Banking Information

Bank Name:	Branch Address:
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I warrant the foregoing information to be true. I will notify Synergy North in writing of any changes in the particulars of the foregoing information within thirty (30) days of such changes occurring.

I hereby authorize Synergy North to obtain from any credit reporting agency, financial institution or any credit grantor, such information as Synergy North may require at any time in connection with my Application and Agreement, and I hereby consent to the disclosure at any time of any information concerning the undersigned to any credit reporting agency or to any credit grantor with whom the undersigned has financial relations.

If this application is accepted by Synergy North, the Corporation will honour all its obligations contained in the Terms of Agreement, hereby acknowledged and received.

Signature: _____	Date: _____
Print Name: _____	Print Position/Title: _____

<p><u>For Synergy North office use only</u> Accepted for Synergy North by: _____</p>	<p>Date of Acceptance: _____</p>
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