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| CREDIT APPLICATION FOR A BUSINESS ACCOUNT   |                |              |        |
|---|----------------|--------------|--------|
| BUSINESS CONTACT INFORMATION  |                |              |        |
| Title:  |                |              |        |
| Company name:   |                |              |        |
| Phone:  | Fax:           | E-mail:      |        |
| Registered company address:   |                |              |        |
| City:   | State:         | ZIP Code:    |        |
| Date business commenced:  |                |              |        |
| Sole proprietorship:  | Partnership:   | Corporation: | Other: |
| BUSINESS AND CREDIT INFORMATION   |                |              |        |
| Primary business address:   |                |              |        |
| City:   | State:         | ZIP Code:    |        |
| How long at current address?  |                |              |        |
| Telephone:  | Fax:           | E-mail:      |        |
| Bank name:  |                |              |        |
| Bank address:   |                | Phone:       |        |
| City:   | State:         | ZIP Code:    |        |
| Type of account   | Account number |              |        |
| Savings   |                |              |        |
| Checking  |                |              |        |
| Other   |                |              |        |
| BUSINESS/TRADE REFERENCES   |                |              |        |
| Company name:   |                |              |        |
| Address:  |                |              |        |
| City:   | State:         | ZIP Code:    |        |
| Phone:  | Fax:           | E-mail:      |        |
| Type of account:  |                |              |        |
| Company name:   |                |              |        |
| Address:  |                |              |        |
| City:   | State:         | ZIP Code:    |        |
| Phone:  | Fax:           | E-mail:      |        |
| Type of account:  |                |              |        |
| Company name:   |                |              |        |
| Address:  |                |              |        |
| City:   | State:         | ZIP Code:    |        |
| Phone:  | Fax:           | E-mail:      |        |
| Type of account:  |                |              |        |
| TERMS AND CONDITIONS  |                |              |        |
| 1. All invoices are to be paid 30 days from the date of the invoice.  |                |              |        |
| 2. By submitting this application, you authorize Kaizen Environmental Services to make inquiries into the banking and business/trade references that you have supplied. |                |              |        |
| SIGNATURES  |                |              |        |
| Date:   | Date:          |              |        |
| Name:   | Name:          |              |        |
| Signature:  | Signature:     |              |        |