



Banking Reference Letter

Name of Bank: _____

Address: _____

City: _____ Province: _____

Contact: _____ Postal Code: _____

Phone: _____ Fax: _____

Re: _____ (Client Name)

The following information is given in the understanding and agreement of the recipient that it will be strictly confidential and that neither the Bank nor the undersigned, shall be, or become liable or responsible for or by reason of the giving of such information, or its being inaccurate or incomplete or otherwise.

Client Since: _____ Expiry/Renewal Date of Credit Facility (dd/mmm/yy): _____

Operating Credit Facility (please use exact dollar amount):

	Operating/ Overdraft	Bulge Facility		Operating/ Overdraft	Bulge Facility
Facility			Maximum Use		
Amount In Use			Minimum Use		
Repayment Terms Balances			Average Credit		

ARE TERM LOANS CURRENT? YES NO
 ANY NSF CHEQUES (in the last 12 months)? YES NO

Margin Requirements: _____

SECURITY:

- Assignment of A/R
- Debenture
- Assignment of Contracts
- General Security Agreement
- Chattel Mtge(s)
- Other, Specify below under remarks
- Personal Guarantees: _____
(list individuals)
- Collateral Mortgages: _____
(municipal addresses)

REMARKS:

Note: If the Bank has issued a terms and conditions (T&C) letter please attach a copy.

Bank Representative: _____
 (Signature) _____ Date (dd/mmm/yy) _____

 (Print Name) _____ (Title) _____

Phone Number: (____) _____

PLEASE RETURN COMPLETED FORM TO THE ABOVE ADDRESS