DOMITE WEAR TECHNOLOGY INC.

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CREDIT APPLICATION

DATE:	SHIP TO:	
INVOICE TO:		
V	PURCHASER:	
PHONE NO:	FAX NO:	
TYPE OF OWNERSHIP:	CORPORATION PARTNERSHIP INDIVIDUAL	
PRINCIPAL OWNERS:		
HST # or IRS #	\$25°	
	REFERENCES - WHERE CREDIT NO	W EXTENDED
BUSINESS		W EXTENDED
BUSINESS I	3. NAME:	
BUSINESS I	3. NAME: ADDRESS:	
BUSINESS 1. NAME ADDRESS:	3. NAME: ADDRESS:	
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