Additional Authorized Users for Businesses

For Businesses Requiring More than 30 Authorized Users

This form must be signed by an authorized financial institution representative and authorized business representative before submitting to Collabria.

Please complete this form with all additional authorized users that will not fit on original application.
System restrictions limit 30 authorized users on original applications.

Application Number:

Name of business:

First Name	MI	Last Name	Date of Birth (MM/DD/YYYY)	Mother's Maiden Name	Authorized Credit Limit

Please submit form via:

EMAIL: credit@collabriafinancial.com operations@collabriafinancial.ca

Name of Financial Institution

Signature of Authorized Financial Institution Representative

Date (MM/DD/YYYY)

Printed name of Authorized Financial Institution Representative

Collabria