

2010 Application Form



For customers needing different sold to and ship to addresses, please include all ship to addresses on a separate form.

Company Name: _____

Address of Business: _____
(Street Address)

(City) (Province) (Postal Code)

Telephone Number: (____) - _____ Fax No.: (____) - _____

Email Address: _____ @ _____

Type of Company: Limited Partnership Sole Proprietorship Year business started: _____

President's Name: _____

Business Tel. No.: (____) - _____ Home Tel. No.: (____) - _____

Manager, Accounts Payable: _____ (____) - _____
(Name) Tel. No.

Financial (Banking) Institution:

Name: _____

Address of financial institution: _____
(Street Address)

(City) (Province) (Postal Code)

Account No.: _____ Telephone No. (____) - _____

Contact: _____ Title: _____

Do you require use of purchase order numbers: Yes No

Names of people permitted to place orders: _____

Tax Number: _____ Amount of Credit Requested: \$ _____

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Business/Trade References: (List your **3 largest volume** supplier references with complete names, addresses, postal codes, phone and fax numbers.)

1. Company Name: _____ Annual Volume: \$ _____

 (Street Address) (City) (Province) (Postal Code)

Contact: _____ Tel: (____) _____
 (Name) Fax: (____) _____ - _____

2. Company Name: _____ Annual Volume: \$ _____

 (Street Address) (City) (Province) (Postal Code)

Contact: _____ Tel: (____) _____
 (Name) Fax: (____) _____ - _____

3. Company Name: _____ Annual Volume: \$ _____

 (Street Address) (City) (Province) (Postal Code)

Contact: _____ Tel: (____) _____
 (Name) Fax: (____) _____ - _____

I/We have read this application in its entirety and do hereby certify that the above information is correct to the best of my/our knowledge.

 (Signature) (Title) (Date)

 (Signature) (Title) (Date)

| | | | |
|-----------------------------|-------------|-------------|---------------------|
| For Office Use Only: | | Acc # _____ | Date: _____ |
| MB# _____ | CL _____ | T/C _____ | C/C _____ |
| TR/C _____ | SLS/C _____ | P/C _____ | S/C _____ F/C _____ |