



705 Middlefield Rd., Unit 106, Scarborough, Ontario, Canada M1V 5H5
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ACCOUNT APPLICATION

COMPANY INFORMATION

Company Name:

Address:

City:

Prov./State:

Postal/Zip Code:

Telephone:

Fax:

Company President or Owner(s):

Number of years in business:

BUSINESS REFERENCES

1) Company Name:

Address:

City:

Prov./State:

Postal/Zip Code:

Telephone:

Fax:

2) Company Name:

Address:

City:

Prov./State:

Postal/Zip Code:

Telephone:

Fax:

BANK REFERENCE NOT LESS THAN FIVE YEARS

Name of Bank:

Account No.:

Branch No. & Address:

City:

Prov/State:

Postal/Zip Code:

Telephone:

NOTE: Initial orders will require payment in advance. A 10% discount will be applied for the initial order. An approved new account will have a \$250.00 credit line, thereafter terms of payment will be net 30 days. Any accounts with an outstanding balance over 60 days, orders will be automatically be put on hold. Shipments will not be made to past due accounts.