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Providing Turn-key Quality Control Solutions, One Source – One Responsibility

CREDIT APPLICATION

CUSTOMER INFORMATION

Company Name _____ Phone Number _____
Address _____ Fax Number _____

Banking Institution _____ Phone Number _____
Address _____

G.S.T. Number _____

Accounts Payable Contact _____ Phone Number _____

SUPPLIER INFORMATION

Company Name _____ Phone Number _____
Address _____ Fax Number _____

Company Name _____ Phone Number _____
Address _____ Fax Number _____

Company Name _____ Phone Number _____
Address _____ Fax Number _____

TERMS AND CONDITIONS Payment shall be made within normal terms (net 30 days.) Thereafter interest shall accrue at the rate of 2.5% per month on the prior month's outstanding balance (30% per annum)

Authorized Signature: _____ **Date :** _____