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 Tél.: (418) 549-8886 (888) 308-0388 Fax: (418) 549-8488

Professional Solution for the flooring Installation Industry

Please Fill form Clearly **CREDIT APPLICATION**

Company Name				Company Started In :
Contact				email :
Address				Buying From :
City	Office Phone		Corporation	
Province	Fax No.		Association	
Postal Code	Cellular No		Registered	
Shareholders				
Buyer Name	Account Payable			
Buyer email	P.S.T. No.	Please attach Blanket		
Monthly Purchase				

COMMERCIAL REFERENCE

Company Name	Contact	Telephone	Fax No.
Bank	Branch	City	Province
Telephone	Account No.	Credit card No & type	Drivers Licence

A. A charge of two percent (2%) (28.0% Annualy) will be added on past due amounts according to invoice terms.
 B. I authorize Prosol Distribution Inc. to obtain or exchange personnel information about me with any credit agent personnel for the purpose to establish and to verify my financial situation.
 C. The company and owner hereby agree that each are jointly and severally responsible for all obligations undertaken herein by the company, and the company hereby represents that the owner is authorized by resolution of the company to sign the present sales agreement. The owner and company hereby agree that the terms herein shall be continuing and shall cover present liabilities (if any) of the company or owner to Prosol Distribution Inc. and all such liabilities incurred after the date hereof. Date : _____

Company : _____ By : _____
 Signature for the Company

Owner Name : _____ By : _____
 Signature For the Owner

Account No.	Credit Limit	Term	Credit Code	Salesman No.
Credit Manager :		Sales manager :		