



HEAD OFFICE
 165 Deslauriers St.
 Saint-Laurent, QC, H4N 2S4
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DISTRIBUTION CENTERS
 MONTREAL: 4305 Griffith St., Saint-Laurent, QC, H4T 2A2 • 514-745-1212
 TORONTO: 161 Cidermill Ave, Vaughan, ON, L4K 4G5 • 905-418-1082
 CALGARY: 5760 9 St SE #103, Calgary, AB T2H 1Z9 • 403 253-4642
 COQUITLAM: 1450 Brigantine Dr, Coquitlam, BC V3K 7C1 • 604 342 1011

Over 42 Locations from Coast to Coast! PROfessional SOLutions for the flooring installation industry

Please Fill form Clearly		CREDIT APPLICATION for Installers			
Company Name				Company Started In :	
Contact				email :	
Address				Prosol branch:	
City		Office Phone		Corporation	
Province		Cellular No		Association	
Postal Code		Fax No.		Registered	
Monthly Purchase			GST or HST Number		
Install for			PST Number		

COMMERCIAL REFERENCE			
Company Name	Contact	Phone	Fax No.
Bank	Branch	City	Province
Phone	Account No.	Credit card No & type	Driver's Licence Number
Social Insurance Number		Car Plate Number	

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 Inc. to obtain or exchange personal information about me with any credit agent personal 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 Inc. and all such liabilities incurred after the date hereof. Date : _____

Company : _____ By : _____
 Signature for the Company

Owner Name : _____ By: _____
 Signature For the Owner

THIS SECTION BELONGS TO PROSOL INC.

Account No.	Credit Limit	Terms	Credit Code	Salesman No.

Approved by Credit Manager: _____ Approved by Sales Manager: _____