



P.J. WHITE HARDWOODS LTD.

www.pjwhitehardwoods.com

Credit Application

- 1200 East Kent Avenue, Vancouver, BC V5X 2X8
- 531 David Street, Victoria, BC V8T 2C7
- 17303-116th Avenue, Edmonton, Alberta T5S 2P7
- 4033-11th Street S.E., Calgary, Alberta T2G 3H1

Phone: 604-327-0241 Fax: 604-327-5335
 Phone: 250-480-0338 Fax: 250-480-0343
 Phone: 780-454-6561 Fax: 780-455-9289
 Phone: 403-243-4747 Fax: 403-243-4193

Salesman #: _____
 Account Type: _____
 Account Number: _____

Date _____

New Account **Credit Increase/Renewal**

FULL LEGAL NAME OF ACCOUNT: _____

OPERATING NAME (IF DIFFERENT): _____

Mailing Address			Shipping Address <input type="checkbox"/> or Same		
City	Province	Postal Code	City	Province	Postal Code
Phone	Fax		Phone	Fax	
Associated Companies			LEGAL FORM OF ORGANIZATION		
HST #	GST #		<input type="checkbox"/> CORPORATION (Limited Company)		
Do You Own or Rent Your Premises			<input type="checkbox"/> PARTNERSHIP		
Year Established	No. of Full-Time Employees		<input type="checkbox"/> PROPRIETORSHIP		
Type of Business			Email Address		
Products you expect to purchase and volume					

SHAREHOLDERS/OWNERS and Percent of Business Owned

Name		Name	
Address		Address	
Phone	Fax	Phone	Fax

KEY PERSONNEL

Director	Purchasing Agent
Director	Accounts Payable Contact
Manager	Accountant

By signing this form, you are authorizing us to collect the information you provide for the purpose of establishing and maintaining a credit account. As well, we will provide your information to our affiliated credit agency, Equifax. You are also authorizing us and Equifax to use this information to generate and obtain such credit reports or other information as they may deem necessary in conjunction with establishing and maintaining a credit account, collecting unpaid debts and any other direct business or credit requirements.

I hereby acknowledge that I have read and understand the foregoing and that I agree to the collection, use and disclosure of personal information as described herein.

 Signature

BANK REFERENCE:

Bank		Manager/Contact Person	Phone
Address		Account Number	Fax
VISA Account Number	Expiry Date	Drivers License #	
Bank Loans	Demand \$	BANK SECURITY (Please check if applicable)	
Other Long Term Debt (Line of Credit)	\$	<input type="checkbox"/> PERSONAL GUARANTEE	
Shareholders/Partners/Owners Equity	\$	<input type="checkbox"/> ASSIGNMENT OF RECEIVABLES	
	\$	<input type="checkbox"/> ASSIGNMENT OF INVENTORY	
	\$		

TRADE REFERENCE:

Name	Phone	Fax
Name	Phone	Fax
Name	Phone	Fax
Name	Phone	Fax
Name	Phone	Fax

TERMS AND CONDITIONS OF SALE:

1. Terms are NET 20th of the month following. Interest charged on overdue accounts at the rate of 1½% per month (18% per annum) calculated from date of invoice.

2. Returns will not be allowed without prior arrangement, and proof of purchase. Returns are subject to a 10% minimum handling and restocking charge.

3. I/We authorize P.J. White Hardwoods Ltd. to perform a consumer report or credit investigation and to obtain any information required related to this application from any source to which P.J. White Hardwoods Ltd. may apply.

4. I/We agree to notify you of any ownership change in the Company or address change for any of us.

PERSONAL AGREEMENT TO PAY

I/We, the Company, and the undersigned, the principals or shareholders of the Company ("Applicant Individual"), apply to **P.J. White Hardwoods Ltd.** for credit for the supply made. In consideration of your agreeing to extend such credit on the above noted terms, to any one or more of us, each of us will jointly and severally indemnify you as principal debtors and not guarantors, and shall ensure payment of all monies which are now, or shall in the future become, due to **P.J. White Hardwoods Ltd.** by the Company.

Dated at _____ this _____ day of _____, 20 ____

Both areas 1 and 2 must be completed. Area 3 must be completed if there is more than 1 owner.

Witness as to Authorized Signature
on Behalf of the Company

1. Executed by the Applicant Company.

Full Name of Company (Please Print)

Corporate Seal

Witness Signature

Per: _____
Authorized Signature

2.

Witness as to Individual's Signature (Please Print Name)

Please print signing Officer's Name
Signed, sealed and delivered by the Applicant Individual

Witness Signature

Signature

Seal

3.

Witness as to Individual's Signature (Please Print Name)

Please print Name
Signed, sealed and delivered by the Applicant Individual

Witness Signature

Signature

Seal