

Company Information

OPERATING NAME			CONTACT		
FULL LEGAL NAME			PHONE		
ADDRESS					
CITY		PROVINCE		POSTAL CODE	
TYPE OF COMPANY PROPRIETORSHIP PARTNERS INCORPORATED	IN BUSINESS SINCE		TYPE OF BUSINESS		
	UNDER PRESENT CONTROL SINCE		NUMBER OF LOCATIONS		
	NUMBER OF EMPLOYEES	FULL TIME	PART TIME	GROSS SALES (LAST YEAR)	
NAME OF CONTACT			TITLE		
ARE PRODUCTS PURCHASED FOR RESALE			YES	NO	PROV SALES TAX #
ESTIMATED ANNUAL PURCHASES \$			AMOUNT OF CREDIT REQUIRED		
ACCOUNTS PAYABLE CONTACT			TITLE		
PRINCIPALS	TITLE	ADDRESS		PHONE:	
1.					
2.					
3.					

Bank References

BANK	BRANCH	HOW LONG
CONTACT	PHONE	FAX
ACCOUNT #	CREDIT LINE	LOAN

Trade References

NAME:	PHONE:	FAX:
ADDRESS		
NAME:	PHONE:	FAX:
ADDRESS		
NAME:	PHONE:	FAX:
ADDRESS		

Landlord or Mortgage Hold

NAME:	CONTACT
ADDRESS	PHONE

Personal Guarantee

We the undersigned guarantees, to hereby jointly, severally and personally guarantee to pay any debt outstanding to APD PRINTING INC

Signature of Guarantor _____

Home Address _____

Phone _____ Social Insurance # _____

Terms and Conditions

1. That the applicant will pay for its purchase from the credit grantor within 30 days from the date of shipment.
2. That interest will be charged on all past due accounts at the rate of 2% per month (24\$ per annum)
3. That a credit investigation may be carried out by the credit grantor and/or its agents in connection with the credit applied or any renewal or extension thereof
4. To the release of credit information to the credit grantor and/or its agents concerning the applicant from anyone whom the applicant has financial relations.
5. APD PRINTING INC will in no way be responsible for damages in excess of the purchase price of the services supplied, not for incidental or consequential damages.
6. All orders should be supplied with a written purchase order stating clearly all information, we will not assume any responsibility from lack of written information.

AUTHORIZED SIGNATURE

PRINT

TITLE

DATE