

APPLICATION AND AGREEMENT FOR CREDIT

COMPLETE ONLY IF CORPORATION COMPLETE ONLY IF PARTNERSHIP (i.e. Limited, Ltd., Incorporated, Inc.) **OR SOLE OWNER Business Business** Legal Business Name: Legal Corporate Name: Date Business Name Registered: Date Incorporated: **Operating As: Operating As: Address** (where invoices and statements to be sent): **Address** (where invoices and statements to be sent): Street: Street: Town/City Town/City (Postal Code) (Postal Code) Tel. No.: Tel. No.: **Accounts Payable Contact: Accounts Payable Contact:** E-mail: Would you like Invoices () E-mailed or () Faxed # _ Would you like Invoices () E-mailed or () Faxed # _ Ship to Address (if different) Ship to Address (if different) Street: Street: Town/City: Town/City: (Postal Code) (Postal Code) Tel. No.: Tel. No.: **Partners or Sole Owners Officers and Directors** 1. Name: 1. Name: Home Address: Home Address: Tel. No.: Tel. No.: Date of Birth E-mail: E-mail: Position: SIN: 2. Name: 2. Name: Home Address: Home Address: Tel. No.: Tel. No.: E-mail: Date of Birth E-mail: SIN: Are business premises owned by the corporation? ___ Who owns the business premises?_ Name of parent/holding corporation? If more than two partners, attach a separate sheet. If more than two officers and directors, attach a separate sheet

KINGSTON

Box 817, 26 Lappan's Lane Kingston Ontario, K7L 4X6 T. 613-546-3677 F. 613-547-4121 Toll Free. 1.800.267.7828 kingston@daltco.com-

BROCKVILLE:

Box 296, 1 Kesco Avenue Brockville Ontario, K6V 5V5 T. 613-345-1411 F. 613-345-3692 Toll Free. 1.800.267-8159 brockville@daltco.com

OTTAWA (KANATA) 93 Hines Road

Kanata Ontario, K2K 2M5 T. 613-592-5511 F. 613-592-5645 Toll Free. 1.800.267-5876 kanata@daltco.com









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Business Information What is your primary business: []	· Electrical Contractor □ Industrial Plant □ Equip	ment Manufacturer
Other		
Fiscal Year End	NAICS Industry code:	
Annual Sales \$	Number of employees	
Anticipated Monthly Purchases from I	Daltco Electric: \$	
Your preferred method of payment:	Cheque	
Bank Information:		
Name:	Account Type:	
Address:	Account No.:	Transit No
Tel. No.:	Contact Person:	
Suppliers (3 minimum - *Must ir	clude your current primary electrical distributor and (2) s	uppliers of other goods)
Business Name	Address	Tel. No
Contact Name	E-mail address:	Fax No
5		
	Address	
Contact Name	E-mail address:	FAX NO
Business Name	Address	Tel. No
Contact Name	E-mail address:	Fax No
 Invoiced amounts shall be paid within 30 	tomer may purchase goods on credit, up to the limit set by Daltc days of the date of the Invoice (the "Due Date"). amounts will be charged from the Due Date to the date of paymin	
 (19.56% per annum), subject to change wi Materials will only be returned, within 90 or as specified by the manufacturer. Error or omission claims must be made within the manufacturer. 	thout notification. I days, subject to Daltco Electric's Return Policy, subject to change within 24 hours of receipt of goods. It is not pass to the buyer until payment of the purchase process.	e without notification,
*Daltco Electric may at any time obtain credit inforr with any of the Customer's dealings with Daltco I	be paid in accordance with the Terms and Conditions of sale specified about the Customer and its principals from any credit bureau, final Electric and Daltco Electric may disclose (upon request) credit information lealings or if Daltco Electric believes disclosure is required by law.	ncial institution, its employer or any other person in connection
		Date:
Applicant's Signature (Authorized Signing (Officer, Partner or Sole Owner)	
Print Name & Position Here:		
	ply (1979) Ltd. providing credit to (Name of company)	
	hereby guarantee payment to Daltco Electric and shall incur with any applicable se	
COMPANY (name of company)	enall inclir with any annlicable co	rvice cnarde
COMPANY (name of company)	shall filedi with any applicable se	ivide sharge.

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