

Rexdale: 310 Carlingview Drive, Toronto, ON M9W 5G1 Scarborough: 8 Milner Avenue, Scarborough, ON M1S 3P8 Oakville: 2190 Winston Park Drive, Oakville, ON L6H 5W1 Tel: 416.679.1048 Fax: 416.679.0848 imechsupply.com

APPLICATION FOR CREDIT

(Please FAX to416.679.0848 or Email to credit@imechsupply.com)
ONLINE VERSION

APPLICANT INFORMATION							
Legal Name of Firm or Individual (in full):							
Other Trade Name(s):							
Affiliated Companies (Past & Present):							
Business address:							
City:	Prov.:	Postal Code:					
Shipping address:							
City:	Prov.:	Postal Code:					
Phone	Fax						
Statement address:							
City	Prov.:	Postal Code					
Phone	Fax						
Nature of Business		Email					
Date Business Commenced	Date Business Incorporated						
☐ Corporation	☐ Partnership ☐ Proprietorship						
OWNERS/PARTNERS/OFFICERS:							
Name	Position	Address	Tel/Cell No.				
BANK:							
Bank Name:		Location:					
Transit No: Account No.:	Contact	Phone No.:					
TRADE REFERENCES:							
Name:	Address:	Fax No or Email:					
1.							
2.							
3.							
Referred by: Please supply salesman name OR indicate if application was picked up at counter	Salesman Name:	Picked up at counter (circle one) Y / N					

ACCOUNT SETUP PARA	METERS:									
Credit Limit Requested \$			Estimated Monthly Purchases		\$	\$				
Allow Back Orders		Y / N	Print Price on Picking Slips			Y / N				
Job Names Required		,	Y / N	Statement Required			Y / N			
Invoice Print Showing (List & Discount/NET): List & Discount: Y / N NET:		NET:	Y / N	Invoice Delivery (mail/email address):						
PO # Required		,	Y / N	Number of Invoice	s Required					
HELP US BETTER UNDER	IELP US BETTER UNDERSTAND YOUR NEEDS AND IMPROVE COMMUNICATIONS:									
nnual Sales \$ Number of Employees:										
CONTACTS: (A/R, A/P, BUYER/FOREMAN)										
Name	Name Position		Phone	Cell	Cell Fax		Email			
		+								
PERSONAL GUARANTEE										
Independent Mechanical Supply Inc. has or may supply, payment for all sums which currently or may hereafter b that this personal guarantee shall continue to be bindir the Business. Signed at in th			pecome due to Indering until Independent	pendent Mechanical st Mechanical supply	Supply Inc. by the Inc. receives payr	Business. I /we dec ment in full for goo	clare and agree ods supplied to			
Phone Number:	Phone Number: Signature:									
AGREEMENT										
Whereas (hereinafter the "Applicant") has requested an open account from Independent Mechanical Supply Inc. (hereinafter the "Seller") for the purpose of purchasing goods and/or services on credit, the following terms and conditions shall apply:										
 Terms are net 30 days. (You may request C.O.D. only). Discounts to be taken on Net Invoice Amount. All invoices shall be payable net and all arrears and over dues will bear interest at the minimum rate of 2% per month or 24% per annum. All short shipments must be reported upon receipt of goods (same day). Merchandise may only be returned with prior authorization from the seller. Cancellation: The Seller reserves the right to cancel this credit facility at any time without prior notice to the Applicant. Credit Investigation: The Applicant and undersigned shall provide to the Seller on an ongoing basis such financial information as may be requested and consents to the verification of all information contained in this Applicant or further documentation which may subsequently be provided in the future and such personal credit information as may be deemed necessary. All credit references indicated are authorized to provide whatsoever information may be requested by the Seller or its Agent. 										
I, the undersigned, declare that all the information supplied in this Credit Form is true and accurate, that I am authorized to request a charge account at Independent Mechanical Supply Inc. Furthermore, by signing below on this Credit Form, I agree and consent to authorize Independent Mechanical Supply Inc. to obtain from any credit reporting agency or any other source, such information as Independent Mechanical Supply Inc. may deem appropriate, at any time in connection with the credit hereby applied for.										
Signed at			in the Province of		_ this da	ay of	, 20			
Please print name	: :			Title:						
	Please print name: Title: Signature:									
For Office Use Only:										
Approved: Date	2: A	cct#:	Salesman#:	Customer Type:	Group Code:	Discount Code:	Territory Code:			
Credit Limit:		Credi	t Days:		Division:					