



16650 Bayview Ave, Newmarket ON L3X 2S8
Tel: (905) 836-1506 X 202 Fax: (905) 836-1552
credit@buchnermfg.com

PLEASE RETURN APPLICATION TO:
<https://e-courier.ca/aQ?tu=a0VD3>

CREDIT APPLICATION (U.S.)

SALES REP #:

COMPANY INFORMATION

NAME (REGISTERED CORPORATE NAME)		BUSINESS PHONE # ()
STREET ADDRESS		FAX # ()
CITY	STATE	ZIP CODE
TYPE OF COMPANY SOLE PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LIMITED COMPANY <input type="checkbox"/>		CELL PHONE # ()
WEBSITE		HOW LONG IN BUSINESS
EMAIL		

PRINCIPALS/OWNERS

1) FIRST NAME	MIDDLE INITIAL	LAST NAME	SS#
STREET ADDRESS		CITY	HOME PHONE # ()
STATE		ZIP CODE	DRIVERS LIC. #
2) FIRST NAME	MIDDLE INITIAL	LAST NAME	SS#
STREET ADDRESS		CITY	HOME PHONE # ()
STATE		ZIP CODE	DRIVERS LIC. #

BANKING INFORMATION

BANK NAME	BRANCH ADDRESS	PHONE # ()
BANK CONTACT PERSON	ACCOUNT NO.	DATE ACCOUNT OPENED

TRADE REFERENCES/SUPPLIERS

(No Toll Free Numbers Please)

1) COMPANY NAME	ADDRESS	PHONE # ()
CITY	STATE	ZIP CODE
FAX # ()		PHONE # ()
2) COMPANY NAME	ADDRESS	PHONE # ()
CITY	STATE	ZIP CODE
FAX # ()		PHONE # ()
3) COMPANY NAME	ADDRESS	PHONE # ()
CITY	STATE	ZIP CODE
FAX# ()		

OTHER INFORMATION REQUIRED

CREDIT LIMIT REQUESTED	ARE PURCHASE ORDERS REQUIRED? YES <input type="checkbox"/> NO <input type="checkbox"/>
FEDERAL I.D. #	IS MONTHLY STMT REQ'D? YES <input type="checkbox"/> NO <input type="checkbox"/>
	PRICE CATALOGUE REQUESTED: CD FORMAT <input type="checkbox"/> PAPER FORMAT <input type="checkbox"/>

PLEASE SEE REVERSE

TERMS AND CONDITIONS

1. The undersigned hereby grants authority and directs the financial institution(s), and trade creditors named on the front page to release any and all information requested by Buchner Manufacturing Inc. or any other searches or inquiries we deem necessary.
2. The undersigned hereby authorizes Buchner Manufacturing Inc. to obtain personal and company credit reports from credit reporting agencies of its choice from time to time as required.
3. The Personal Guarantee is a separate document but constitutes an integral part of granting credit to the Applicant.
4. Terms are net 30 unless otherwise advised.
5. A service charge of 2% per month (24% per annum) will apply on the amount of any overdue account from the date such account becomes overdue. Accounts unpaid after 30 days from invoice date shall be considered overdue.
6. All returned cheques are subject to a \$25.00 administration fee and service will be disrupted until the subject cheque has been cleared.
7. Accounts over the pre-arranged credit limits and which are also delinquent are put "on hold" until arrangements have been made to have the account returned to good standing.
8. All returns are subject to authorization by Buchner's head office within 7 days of receiving the product and subject to a 20% restocking charge unless defective.
9. All damaged goods must be noted immediately on packing slip or bill of lading upon receipt of materials and product must be available for inspection. Goods cannot be disposed of without authorization from Buchner Manufacturing Inc. Failure to do so will forfeit claim.
10. Items ordered outside of normal stock are not returnable.
11. Warranties are subject to the approval of the original manufacturer/supplier. Any claims are limited to the original invoice value and cover material only. Buchner Manufacturing Inc. is in no way responsible for forming, shaping or installation which occurs outside of their facilities. This is the responsibility of the distributor, dealer, contractor or applicator.
12. The Applicants agree to notify Buchner Manufacturing Inc. promptly and in writing of changes in any of the following information: business name, ownership, address, banking information or other information regarding the company structure.

IN WITNESS WHEREOF I have hereunto affixed my hand and seal this _____ day of _____, 20_____ .

I/WE HAVE READ AND UNDERSTOOD THE ABOVE TERMS AND HEREBY AGREE TO ABIDE BY THESE TERMS AND CONDITIONS AND I AM AUTHORIZED TO BIND THE APPLICANT TO THIS LEGAL COMMITMENT.

SIGNED, SEALED AND DELIVERED

Signature of Authorized Representative

Signature of Authorized Representative

In the presence of

In the presence of

Witness

Witness