



RETURN COMPLETED
FORM VIA FAX TO:

HEAD OFFICE
988 ALLOY DR
THUNDER BAY ON P7B 6A5
TEL (807) 623-9561
FAX (807) 623-2943

NEW ACCOUNT CREDIT APPLICATION

ALL PAGES MUST BE COMPLETED FOR CREDIT APPROVAL – Please Print Clearly

Company Name: _____

Mailing Address: _____

City: _____ Prov: _____ Postal Code: _____

Ship-to Address (if different from above): _____

Main Phone: _____ Main Fax: _____

Web Site: _____ Main Email: _____

Name(s) of Owner(s): _____

Accounting Contact Name: _____

Tax Exemption # _____

Please complete and return "PURCHASE EXEMPTION CERTIFICATE"

Years in Business _____ Credit Limit Desired \$ _____

I Hereby Authorize Equipment World Inc a Secured Interest in Acquired Merchandise and Permit Equipment World Inc The Right to Secure the Properties for Payment of our Liabilities and Obligations. All Items Remain The Property of Equipment World Inc, Until Paid for In Full.

Should our Credit Be Approved, I/We Hereby Promise To Pay the Outstanding Balance on our Account In Accordance to The Terms of The Sale. It is Understood Accounts Overdue 30 Days or More are Subject to a Two Percent (2%) Per Month, Twenty-Four Percent (24%) Per Annum Charge Debited Directly to Applicant's Account Becoming an Actual Part of the Total Indebtedness Along with Any and All Costs Incurred in Collecting Such Overdue Accounts.

Based on Credit Approval and Item Purchased, First Time Orders May Require Pre-payment or C.O.D.

PRINT NAME _____ TITLE _____

SIGNATURE _____ DATE _____

OFFICE USE ONLY:

PURCHASE AMOUNT \$ _____

PURCHASE DESCRIPTION _____

AUTHORIZATION _____



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Equipment World Inc recognizes the importance of protecting the privacy of information we may collect from our customers and potential customers. Any information collected will only be used with the strictest of confidence in order to provide you with the best possible service. Equipment World Inc will not disclose any personal information unless authorized to do so and will make all reasonable efforts to protect such information including protecting the personal information from loss, theft, or unauthorized access. I acknowledge that Equipment World Inc will obtain information and consent the use of such information for internal purposes.

I _____ BEING A REPRESENTATIVE OF _____
PRINT NAME COMPANY NAME

HEREBY ACKNOWLEDGE AND GIVE AUTHORIZATION TO EQUIPMENT WORLD INC TO COLLECT CREDIT INFORMATION FROM THE REFERENCE NAMES I HAVE LISTED BELOW, IN ORDER TO SET UP AN ACCOUNT.

SIGNATURE _____ TITLE _____

PRINT NAME _____

TRADE REFERENCES:

SUPPLIER #1: NAME _____
PHONE # _____ FAX# _____

SUPPLIER #2: NAME _____
PHONE # _____ FAX# _____

SUPPLIER #3: NAME _____
PHONE # _____ FAX# _____

BANK REFERENCE:

NAME OF BANK: _____

ADDRESS: _____

PHONE# _____ FAX# _____

ACCOUNT MANAGER: _____



Please Complete For Our Customer Database:

COMPANY NAME: _____ DIVISION: _____

Type of Business _____

SIC CODE Number: _____ (If unsure, please check: www.siccode.com/index.php)

CONTACT INFORMATION:

POSITION: Owner / Manager

FIRST NAME: _____ LAST NAME: _____

EMAIL: _____ EXT #: _____

Would You Like Us To Send Them Our Product Catalogue? YES ____ NO ____

Can we contact them via email? YES ____ NO ____

POSITION: Purchasing

FIRST NAME: _____ LAST NAME: _____

EMAIL: _____ EXT #: _____

Would You Like Us To Send Them Our Product Catalogue? YES ____ NO ____

Can we contact them via email? YES ____ NO ____

POSITION: Warehouse / Shipping-Receiving

FIRST NAME: _____ LAST NAME: _____

EMAIL: _____ EXT #: _____

Would You Like Us To Send Them Our Product Catalogue? YES ____ NO ____

Can we contact them via email? YES ____ NO ____

ADDITIONAL CONTACT:

POSITION: _____

FIRST NAME: _____ LAST NAME: _____

EMAIL: _____ EXT #: _____

Would You Like Us To Send Them Our Product Catalogue? YES ____ NO ____

Can we contact them via email? YES ____ NO ____

Please Note: COMPLETION OF ALL PAGES IS MANDATORY FOR CREDIT APPROVAL