

General Information:

Until a trade account is established, it is our policy that all orders are prepaid. This deposit can be paid by VISA®, MasterCard, or cash. Once our credit department has approved your account, our credit terms are Net 30 days. Orders paid full in advance will qualify for a 5% discount.

Company Information:

Company Name: _____ Phone Number: _____ Fax Number: _____

Mailing Address: _____ City: _____ Province: _____ Postal Code: _____ Country: _____

Shipping Address (IF SAME AS MAILING, LEAVE BLANK): _____ City: _____ Province: _____ Postal Code: _____ Country: _____

CEO / Manager: _____ Accounts Payable Contact Name: _____ Purchasing Agent Contact Name: _____

GST/HST Registration Number: _____ How many years has your business been established? _____

What is the nature of your business? _____

Business Structure: Corporation Partnership Sole Proprietor Other: _____

If you have a shipping preference, please indicate the company and pertinent details below (Company, phone number, account info): _____

Bank Reference:

Name of Bank: _____ Phone Number: _____ Contact Name: _____

Mailing Address: _____ City: _____ Province: _____ Postal Code: _____ Country: _____

Credit References:

Company Name: _____ Contact Name: _____ Phone Number: _____ Fax Number: _____

Mailing Address: _____ City: _____ Province: _____ Postal Code: _____ Country: _____

Company Name: _____ Contact Name: _____ Phone Number: _____ Fax Number: _____

Mailing Address: _____ City: _____ Province: _____ Postal Code: _____ Country: _____

Company Name: _____ Contact Name: _____ Phone Number: _____ Fax Number: _____

Mailing Address: _____ City: _____ Province: _____ Postal Code: _____ Country: _____

Credit Reference Authorization:

I hereby certify that the information contained in this credit application is correct, and that I am authorized signing officer to allow Maritime Labels & Packaging to use this information to determine if credit will be extended to our company and the amount of credit we shall receive. I hereby authorize the bank and trade references listed in this application to release the information necessary to assist in establishing a line of credit. Upon approval of an account, we will abide with the terms and conditions set forth by Maritime Labels & Packaging.

Authorized Signature: _____ Title / Position: _____ Date: _____