

CREDIT APPLICATION

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| Legal name of the company: |
| Address: Delivery address: (if different)Delivery informations required:Tailgate Appointment required Straight Truck53ft trailerPlease tell us your receiving hours: Other requirements: Nature of the business : # year in business : GST / QST number  |
| City : Postal code : |
| Phone number : |
| Fax number :  |
| E-mail address of the buyer : E-mail adress for promotion /deal : |

Financial information

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| --- |
| Financial institution:Account manager:Credit limit requested:Transit number:Institution number :Account number : |
| Address of the bank: Phone number:Fax number : |
| Contact :  |
| Trade references: (4)Name: Name: Address: Address:Phone number: Phone number:Contact:  Contact : Name : Name : Address : Address :Phone number : Phone number :Contact :  Contact :  |
| General information |
| Account payable contact :E-mail adress : |
| Buyer name:E-mail adress : |
| Credit limit requested : |
| Invoices sent by : E-mail :Mail :Would you like an account statement ?Yes or NoBy :Fax :Email :Mail : |

**The owners, the partners and the shareholders**

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| --- | --- | --- |
| Name : | Address : | Phone Number |
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**Business Agreement**

Between \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(buyer/name of the company)

and **Groupe NPI ( vendor)**

Signed at : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Please send it to: comptabilite@nikolpoulin.com and we will get back to you shortly ! Thank you !