

INTREPID DISTRIBUTORS

Phone: 905-607-5170/800-263-6011

Fax : 905-607-4727/800-361-6307

(Please fill in this form and fax it to us. Please print. Thanks)

CREDIT APPLICATION

Company Name _____ Trade Name _____

Street Address: _____ City: _____ Prov. _____ PC: _____

Invoice Address: _____ City: _____ Prov. _____ PC: _____

Telephone Number _____ Fax Number _____

Corporation _____ Partnership _____ Sole Proprietor _____ Other: _____

Year Established _____ Type of Business _____

Accounts Payable Contact: _____ Phone: _____ Ext: _____

Accounts Payable Email: _____

Subsidiary of _____

Head Office Address _____

Credit Limit Desired \$ _____ PST Number: _____

Shipping Method Preferred: _____ Account # * _____

BANK REFERENCES:

Bank Name _____ Bank Name _____

Account# _____ Account# _____

Address _____ Address _____

Telephone Number _____ Telephone Number _____

Bank Contact _____ Bank Contact _____

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TRADE CREDIT REFERENCES:

Vendor Name _____ Vendor Name _____
Account # _____ Account# _____
Address _____ Address _____
Telephone Number _____ Telephone Number _____
Email: _____ Email: _____

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Vendor Name _____ Vendor Name _____
Account# _____ Account# _____
Address _____ Address _____
Telephone Number _____ Telephone Number _____
Email: _____ Email: _____

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Applicant agrees the following terms and conditions apply to all purchases and credit, if allowable by law. All overdue invoices bear interest at 2% per month on unpaid balance. Applicant will pay all costs of collection, including but not limited to attorney fees and court costs. Credit Line granted to Applicant may be terminated, altered, suspended or otherwise changed at any time, with or without cause. The terms of all transactions shall be as stated on Vendor's documents, which shall govern all transactions regardless of conflicts, if any, with Applicant's documentation. Applicant hereby authorizes vendor, or vendor's representative to contact all references, weather listed herein or not, and to receive there from all credit information, including confidential information, as Vendor may request. Applicant understands acceptance of this Application by Vendor does not constitute an extension of credit nor a promise to extend credit. Any extension of credit by vendor does not constitute a promise to extend additional or future credit.

Date Authorized Signature Printed Name and Title

**Intrepid's Payment Terms are Net 30 days.
All Accounts over 30 days go on Automatic Credit Hold.**

* If you have not provided shipping method, we will ship via courier of our choice and add \$ 15.00 or actual cost of shipping, whichever is higher , to your invoice.