

Please fill out this application and fax to +1 (514) 227-5416 or mail it to:  
**Simpex International**  
2348 Lucerne Road, Unit 236  
Montreal, QC H3R 2J8  
Canada

### Company Information

Business Legal Name: \_\_\_\_\_  
Operating Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_  
Zip / Postal code: \_\_\_\_\_ Country: \_\_\_\_\_  
GST # \_\_\_\_\_ PST or QST # \_\_\_\_\_  
HST # \_\_\_\_\_ Federal ID # \_\_\_\_\_  
Purchasing Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Ship To Address

Name of Firm or Individual: \_\_\_\_\_  
Shipping Address: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_  
Zip / Postal code: \_\_\_\_\_ Country: \_\_\_\_\_  
Shipping Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Shipping method: \_\_\_\_\_  
Customs broker: \_\_\_\_\_ Is other broker acceptable?  Yes  No  
Is other ship to address acceptable?  Yes  No

### Billing Address Same as "Company Information" Same as "Ship To Address"

Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State / Province: \_\_\_\_\_  
Zip / Postal code: \_\_\_\_\_ Country: \_\_\_\_\_  
Accounts Payable Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
How do you want to receive invoices?  By e-mail  By fax  By regular mail

### Purchase Order Restrictions

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Credit Information

Legal name of firm or individual: \_\_\_\_\_

Hereby applies for credit in accordance with the terms and conditions of:

**Simpex International**  
**2348 Lucerne Road, Suite 236**  
**Montreal, QC H3R 2J8**  
**Canada**

**Payment:** Net amount due within 30 days from the invoice date.

## Ownership

Public Corporation    Private Corporation\*    Partnership\*    Individual\*

Name of principal(s) \_\_\_\_\_ SS or SIN # \_\_\_\_\_

\_\_\_\_\_  
\*As a principal owner(s) of the above company, I (we) personally guarantee any indebtedness of the company.

## Bank reference

Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Account number: \_\_\_\_\_ Account manager: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## Trade references

Business Name	Contact Name	Phone	Fax
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1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

The undersigned, being a duly appointed representative of the above credit applicant (the Client), hereby authorizes the above bank to reveal required account information, and authorizes Simpex International to communicate with the above trade references and with any other agents and /or credit bureau to obtain copy of the Client's file. The undersigned hereby understands its account payment obligations and therefore agrees to the above terms and conditions in order for the present credit application to be processed.

*(For Quebec Residents Only) The parties hereto have expressly requested the present agreement be written in the English language. Les parties à la présente convention reconnaissent qu'elles ont exigées que la présente convention soit rédigée en langue anglaise.*

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
PLEASE PRINT NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

OFFICE USE ONLY	Credit limit	Authorized signature	Date approved