

Thank you for taking the time to apply for a Metalworks Credit Account. To make sure we can process your application as quickly as possible, please ensure all your details are completed in full. The turnaround time for new accounts will depend on the credit information supplied and response time of credit contacts. Print, sign and mail this form to our office, or scan it and send it by email to info@metalworks.com.

***Please note:** All required fields (designated with an * after the field name) in each section must be filled in before submitting.

COMPANY INFORMATION

LEGAL BUSINESS NAME*		
ADDRESS LINE 1*	ADDRESS LINE 2	
CITY*	PROVINCE	CANADA
ZIP/POSTAL CODE*	PHONE*	FAX
ACCOUNTS PAYABLE INFORMATION		
FIRST NAME*	LAST NAME*	
EMAIL*	PHONE*	EXT
TYPE OF BUSINESS*	HST#	
DATE ESTABLISHED		
DD*	MM*	YYYY*
REQUESTED CREDIT LIMIT*	ESTIMATED MONTHLY SALES*	

COMPANY PRINCIPALS

FIRST NAME*	LAST NAME*	TITLE*
FIRST NAME*	LAST NAME*	TITLE*
FIRST NAME*	LAST NAME*	TITLE*

BANK INFORMATION

INSTITUTION NAME*	TRANSIT#	ACCOUNT#
ADDRESS LINE 1*	ADDRESS LINE 2*	
CITY*	PROVINCE	CANADA
ZIP/POSTAL CODE*	PHONE*	FAX
CONTACT		
FIRST NAME*	LAST NAME*	

TRADE REFERENCES

1.	FIRST NAME*	LAST NAME*
	EMAIL*	PHONE* EXT
2.	FIRST NAME*	LAST NAME*
	EMAIL*	PHONE* EXT
3.	FIRST NAME*	LAST NAME*
	EMAIL*	PHONE* EXT

I/We expressly consent to METALWORKS Corp. or VERI-CHEQUE LTD., to obtain any reports containing credit or personal information that is required in obtaining credit from METALWORKS CORP. I/We declare that the information given on this application is true and accurate in every aspect. This declaration is made for the purpose of obtaining credit from METALWORKS CORP and will remain confidential. ©2019 METALWORKS HVAC SUPERSTORES. ALL RIGHTS RESERVED.

SIGNATURE _____

DD*	MM*	YYYY*
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