



# BC Fasteners & Tools Ltd

Kelowna • Vernon • Penticton • Kamloops

\*\*\* Email Application to [ar@bcfasteners.com](mailto:ar@bcfasteners.com) or Fax to 250 868 9223 – Attention AR \*\*\*

All new accounts can choose between COD or First of Month Billing. For First of Month Billing, a credit card will be securely stored on file to be charged on the first business day of each month.

Charge accounts will not be activated until the account has accrued \$5000 in sales. The account must maintain \$500 in sales per month to maintain its credit status. Any exceptions will be assessed on a case by case basis.

## Credit Application

COD

1<sup>st</sup> of the month billing

Business Name \_\_\_\_\_

Years in Business \_\_\_\_\_ Purchase Order Required  Yes  No PST# (if exempt) \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Ship to Address (if different than above): \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_ Postal Code \_\_\_\_\_

## Principle Contacts

Name \_\_\_\_\_ Title \_\_\_\_\_ P \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ P \_\_\_\_\_ Email \_\_\_\_\_

Accounts Payable Name \_\_\_\_\_ P \_\_\_\_\_ Email \_\_\_\_\_

Purchaser Name \_\_\_\_\_ P \_\_\_\_\_ Email \_\_\_\_\_

## Credit References \*\*Required for 1<sup>st</sup> of the month billing\*\*

1. \_\_\_\_\_ P \_\_\_\_\_ Fax \_\_\_\_\_

2. \_\_\_\_\_ P \_\_\_\_\_ Fax \_\_\_\_\_

3. \_\_\_\_\_ P \_\_\_\_\_ Fax \_\_\_\_\_

Name of Company Bank Branch \_\_\_\_\_ Bank Line of Credit \_\_\_\_\_

Bank Contact \_\_\_\_\_ P \_\_\_\_\_

Ever filed for Bankruptcy  Yes  No Date of Bankruptcy \_\_\_\_\_

**Credit Terms:** I/We request you to extend credit to the undersigned and I/We jointly and severally agree to pay to your usual terms of sales. If the account should become past due, a service charge may be charged to out account at the rate of 2% per month on the overdue balance.

Signed \_\_\_\_\_

Date \_\_\_\_\_