

Invoicing Information:

Shipping Information:

Company Legal Name: _____
 Address 1: _____
 Address 2: _____
 City: _____
 Postal Code: _____
 Telephone : _____
 Fax: _____

Co. Name: _____
 Address 1: _____
 Address 2: _____
 City: _____
 Postal Code: _____
 Telephone : _____
 Fax: _____

Company Information:

Corporate Officers:
 Name: _____ Title: _____
 Name: _____ Title: _____
 Name: _____ Title: _____

Nature of Business: _____ # of Years in Business: _____
 Type of Ownership: _____ GST #: _____
 Annual Sales (\$ CND): \$ _____ PST Status: _____
 (Provide exemption certificate, if applicable)

Controller's Name: _____ Direct tel. #/ext: _____
 A/P Contact: _____ Direct tel. #/ext: _____
 Purchasing Contact: _____ Direct tel. #/ext: _____
 Annual Pumps & Parts Purchases (\$ CND): \$ _____ (Pumps) \$ _____ (Parts)

Bank and Trade References: (Please include atleast one mechanical equipment supplier)

Bank Name: _____	Contact: _____
Address: _____	Acct Number: _____
_____	Tel Number: _____
_____	Fax: _____
Mech. Equip. Supplier: _____	Contact: _____
Address: _____	Telephone: _____
_____	Fax: _____
_____	Email: _____
Supplier: _____	Contact: _____
Address: _____	Telephone: _____
_____	Fax: _____
_____	Email: _____
Supplier: _____	Contact: _____
Address: _____	Telephone: _____
_____	Fax: _____
_____	Email: _____

Please indicate if a P.O. NO. is required YES () NO ()

Terms of Payment: Standard terms for accounts with approved credit are Net fifteen (15) days from date of invoice with a service and interest charge of 1-1/2% per month (18% per annum) applied on past due invoices. Terms for first time Buyers, orders for customized equipment or where credit is not established are Cash with Order (CWO) via certified funds only (certified cheque, bank draft, wire transfer money order). Printed terms of payment on face of Seller's quotation shall take precedence. Credit privileges and shipments will be suspended if payments are not received within 45 days from date of invoice. See AD Process Supply Standard Terms & Conditons of Sale for all other terms and conditions.

AUTHORIZATION: I/WE hereby authorize AD Process Supply to proceed with whatever credit investigation is necessary to process this application.

Date: _____ Signature: _____

PLEASE FAX COMPLETED FORM TO (905) 342-2485