



Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Shipping Address \_\_\_\_\_  
\_\_\_\_\_

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

Website URL \_\_\_\_\_

Business or Federal Tax ID number \_\_\_\_\_

Type of Business \_\_\_\_\_

Date Business Established \_\_\_\_\_

Are you a :     CORPORATION     PARTNERSHIP     INDIVIDUAL

Name of Principle \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Purchasing Contact \_\_\_\_\_

Email \_\_\_\_\_

Accounts Payable Contact \_\_\_\_\_

Email \_\_\_\_\_

**TRADE REFERENCES**

Company Name \_\_\_\_\_

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

Email \_\_\_\_\_

Company Name \_\_\_\_\_

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

Email \_\_\_\_\_

Company Name \_\_\_\_\_

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

Email \_\_\_\_\_

**BANK REFERENCE**

Bank Name \_\_\_\_\_

Address \_\_\_\_\_

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

Authorized Signature \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Witness to Signature \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_

This area for Stright-MacKay office use only

**TERMS AND CONDITIONS**

1. All invoices are payable 30 days from date of invoice and if not paid within 30 days are considered past due.
2. A service charge of 2% per month will be added to all past due amounts.
3. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department. Orders will be held or shipped on a C.O.D. basis.
4. Credit limits on each account will be strictly adhered to and are subject to periodic review.
5. Those signing this application are jointly and severally liable for all purchases and/or services requested from Stright-MacKay Ltd. under their own name, a trade name or a corporate name.

Amount of Credit requested

\$ \_\_\_\_\_

Purchase Order Required?

Yes     No

Preferred Method of Correspondence:

Invoices and Statements

Email     Fax

Quotes and Acknowledgements

Email     Fax

The undersigned hereby declares that all of the information contained herein is true and accurate and that I (we) am (are) authorized to request a credit account from Stright-MacKay Ltd. I (we) hereby authorize and empower Stright-MacKay Ltd. to investigate my (our) credit rating in every respect and, without limiting the generality of the foregoing, to contact any bank or other business entity with which I (we) may have business or personal dealings in order to determine my (our) eligibility for credit. I have read the terms and conditions below and agree to be bound by these terms and conditions.