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 Grande Prairie, AB
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 Box 366

CUSTOMER CREDIT APPLICATION

****Please attach/provide information on all locations for this business****

Company Name: _____

Billing Address: _____ Ship to Address: _____

Telephone: _____ Fax: _____

Main Contact: _____ E-mail: _____

Head Office Address: _____ Phone: _____

Fax: _____

Type of Business: _____ # of Years in business _____

A/P Contact: _____ Telephone: _____

E-mail: _____ Amount of Credit Desired: \$ _____ Per Month

PO Required? _____ Statements: Mailed E-mailed

Name of Bank: _____

Account Manager: _____ Telephone: _____

Bank Address: _____

TRADE REFERENCES

(Must have fax numbers)

Name of Supplier: _____ Telephone: _____

Address: _____ *****Fax: _____

Contact: _____

Name of Supplier: _____ Telephone: _____

Address: _____ *****Fax: _____

Contact: _____

Name of Supplier: _____ Telephone: _____

Address: _____ *****Fax: _____

Contact: _____

I certify that the above information is true and hereby authorize Marmit Plastics to obtain such credit reports or other information as may be necessary in establishing and maintaining a credit account.

I understand that: 1) Upon approval of credit, terms are net 30 days, unless otherwise quoted.

2) Credit privileges may be withdrawn if account falls into arrears.

3) Interest charges of 2.0% per month will be charged on amounts over 30 days.

Signed: _____ Date: _____

Print Name: _____ Title: _____