

TURKSTRA LUMBER

COMPANY LIMITED

HEAD OFFICE

1050 UPPER WELLINGTON, HAMILTON, ONTARIO L9A 3S6 TEL. (905) 388-8222 FAX (905) 388-9891

Always on the Level



APPLICATION FOR COMMERCIAL CREDIT

Full Legal Name: _____ Website: _____

Operating Name (if any): _____

UNIT NUMBER	STREET NUMBER	STREET NAME		CITY/TOWN
PROVINCE	POSTAL CODE	PHONE NUMBER	FAX NUMBER	MOBILE NUMBER

APPLICANT'S LEGAL STATUS

Sole Proprietorship Date Business Started _____ Is the Partnership/Corporation Valid, Subsisting and Operating? _____
 Partnership Incorporation Date _____
 Corporation Number of Employees _____

LIST ALL AFFILIATED COMPANIES/BUSINESSES

1. _____ 3. _____
2. _____ 4. _____

PARTICULARS OF PROPRIETOR/PARTNERS/PRINCIPALS (i.e. Directors, Officers, Shareholders)

Full Name _____ Home Address (in full) _____

Phone Number _____ Position _____ S.I.N. _____ Birth Date (mm/dd/yy) _____

Full Name _____ Home Address (in full) _____

Phone Number _____ Position _____ S.I.N. _____ Birth Date (mm/dd/yy) _____

P.O. Required Yes No Sales Tax Exempt Yes If Exempt Sales Tax Number _____

Authorized Purchasers _____

A/P Contact _____ E-mail _____

TRADE CREDIT REFERENCES (MAJOR)

Name of Supplier	Address of Supplier	Phone Number	Fax Number
1. _____			
2. _____			
3. _____			

BANKING DETAILS

Name	Branch	Phone Number	Account Number	Manager's Name

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BRANTFORD 54 Oxford St. N3R 5C6 Tel: 519-759-3150 Fax: 519-759-5902	CAMBRIDGE 170 Beverly St. N1R 5TP Tel: 519-623-1410 Fax: 519-622-2361	DUNDAS 355 Mill Street L9H 2L9 Tel: 905-628-9924 Fax: 905-628-9993	DUNNVILLE 200 Ramsey Dr. N1A 2X1 Tel: 905-774-7571 Fax: 905-774-3436	FORT ERIE 308 Gorham Rd. LOS 1N0 Tel: 905-894-5200 Fax: 905-894-5206	HAMILTON 1050 Upper Wellington L9A 3S6 Tel: 905-388-8220 Fax: 905-388-6261	NIAGARA FALLS 4555 Kent Ave. L2J 1J1 Tel: 519-428-5111 Fax: 905-374-9827	SIMCOE 545 Queensway W. N3Y 4J9 Tel: 519-428-5111 Fax: 519-428-0528	SMITHVILLE 304 Station Road LOR 2A0 Tel: 905-957-3318 Fax: 905-957-7339	STONEY CREEK 370 Green Road L8E 2B3 Tel: 905-561-1112 Fax: 905-662-1183	WATERDOWN 61 Hamilton St. LOR 2H0 Tel: 905-689-6604 Fax: 905-689-4990	WOODSTOCK 1290 Dundas St. N4S 8Y4 Tel: 519-537-6259 Fax: 519-537-8246

Applicant signing below agrees to the following:

A 2% discount will be given (calculated before H.S.T. is added) on that month's purchases if the account is paid in full by cash or cheque, by the 15th of the month following the month of purchase. No discounts will be allowed unless all prior outstanding balances are paid in full.

Discounts taken, but not earned, will not be allowed.

Accounts are due for payment by the end of the month following the month of purchase.

All payments received in any month will be applied in the following sequence:

1. Outstanding interest and/or service charges;
2. Unpaid balances from previous months;
3. Current month's purchases.

Interest of 24% per annum, charged monthly will be charged on accounts once 30 days past due. In any month where the accrued interest is less than \$5.00, a \$5.00 service charge will be payable in lieu of interest. Customer agrees to be responsible for any legal fees incurred in connection with collection of the account.

Where the applicant is a corporation, sole proprietorship, partnership, a personal guarantee from the principal(s) will be required before this application is complete.

I hereby authorize Turkstra Lumber Company Limited, to conduct inquiries into the credit history of the applicant. This may include but is not limited to requesting and obtaining a consumer credit report on any principals or owners of the company. It is understood and agreed that if credit is granted, credit data may be released to certain reporting agencies, as determined by Turkstra Lumber Company Limited to be appropriate (Eg. Local Credit Bureau).

I also agree that, upon request by other credit grantors, Turkstra Lumber Company Limited may release information pertaining to my account performance.

The Corporation hereby warrants that it has authority to enter into the terms and conditions of this application on behalf of itself and on behalf of its principals and owners.

Witness

Applicant

Signature of Witness

Signature of Applicant

Name _____
(Please Print)

Name _____
(Please Print)

Address _____

Date _____

Telephone _____

Location _____

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

Manager's Suggested Credit Limit _____ Credit Limit Approved Of _____

Personal Guarantee Received - Date _____

Manager/Salesman Assigned _____

Credit Declined _____

Date _____

Signature _____

TURKSTRA LUMBER COMPANY LIMITED

ALWAYS ON THE LEVEL



Letter of Personal Guarantee

IN CONSIDERATION of Turkstra Lumber Company Limited granting credit to

(company name)

I, We, the undersigned and each of them (if more than one) hereby jointly and severally guarantee payment to Turkstra Lumber Company Limited of all amounts owing on account for purchases made by

(company name)

and all charges for interest on such account such payment to be made on or before the 15th day of the month following purchases.

This guarantee will continue in effect until revoked on thirty (30) days notice in writing to Turkstra Lumber Company Limited. After the expiry of such notice, the undersigned will remain liable by this guarantee for the total amount outstanding on the date the notice of termination expired, until paid in full.

DATED at _____, Ontario, this _____
day of _____, 20 _____

Witness

Applicant

Signature of Witness

Signature of Principle of Company

Name _____
(Please Print)

(Please Print)

Address _____

Signature of Principle of Company

Tel. _____

(Please Print)