

VANCOUVER ISLAND
#1 – 4386 Boban Drive
Nanaimo, BC V9T 6A7
PHONE (250) 756-9191
FAX (250) 756-9109

*** HEAD OFFICE ***
#130 - 2351 No. 6 Road
Richmond, BC V6V 1P3
PHONE (604) 279-9120
FAX (604) 279-9125
TOLL FREE 1-877-301-9191

B.C. INTERIOR DIVISION
#130 – 395 Penno Road
Kelowna, BC. V1X 7W5
PHONE (250) 765-6425
FAX (250) 765-6457
TOLL FREE 1-888-922-2773

CREDIT APPLICATION



NAME _____
ADDRESS _____
CITY & PROVINCE _____ POSTAL CODE _____
PHONE include area code _____ FAX include area code _____
BUSINESS TYPE Sole Proprietorship Partnership Corporation
NUMBER OF YEARS IN BUSINESS _____ PST# _____

NAME AND ADDRESS OF INDIVIDUALS OR PARTNERS

1. Name 2. Title 3. Home Address 4. Home Phone or Office

NAME OF CONTACT PERSON REGARDING PURCHASE ORDERS AND INVOICE PAYMENTS

1. Name 2. Title 3. Address 4. Phone 5. Fax

BANK NAME _____ ACCT. NUMBER _____
ADDRESS _____
CONTACT NAME & TITLE _____
PHONE include area code _____ FAX include area code _____

TRADE REFERENCES

COMPANY NAME	CONTACT & TITLE	PHONE	FAX
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

THE ABOVE INFORMATION IS HEREWITH SUBMITTED FOR THE PURPOSE OF OPENING AN ACCOUNT AND I DO HEREBY CERTIFY THIS INFORMATION TO BE TRUE. I DO HEREBY AGREE TO PAY WITHIN INVOICING TERMS. I HAVE READ AND AGREE TO PCW'S STANDARD CONTRACT TERMS AND CONDITIONS.

PRINT NAME _____ SIGNATURE _____ TITLE _____ DATE _____