

Toll Free 1-888-868-2658 Phone 780-532-0366 Box 366 Grande Prairie, AB T8V 3A5

## **CUSTOMER CREDIT APPLICATION**

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

Company Name:	
Billing Address:	Ship to Address:
Tr. 1 1	Fax:
11: 0	E-mail:
Head Office Address:	Phone:
	Fax:
Type of Business:	# of Years in business
	Telephone:
	Amount of Credit Desired: \$ Per Month
PO Required?	Statements: Mailed   E-mailed
Name of Bank:	
	Telephone:
Bank Address:	
Name of Supplier:Address:Contact:	
Name of Supplier:	Telephone:
Address:	
Contact:	
Name of Supplier:	Telephone:
Address:	**AR Email:
may be necessary in establishing and main I understand that: 1) Upon approval of cre 2) Credit privileges ma	e and hereby authorize Marmit Plastics to obtain such credit reports or other information a ntaining a credit account.  Edit, terms are net 30 days unless otherwise quoted.  The withdrawn if the account falls into arrears.  1.0% per month will be charged on amounts over 30 days.
Signed:	Date:
Print Name:	