



**BANK INFORMATION**

Note: This information is mandatory if applying for terms

_____	_____	_____
Name of Bank	Account #	Contact Name
_____	_____	_____
Bank Address	Fax Number	Phone Number

**PROVIDE THREE CREDIT REFERENCES**

Note –please provide references from companies you have term accounts with (not COD)

Please list your OEM if applicable

(NOTE: We will not accept references from: (Preston Cycle, Mercury Marine and BSL))

Name of Company \_\_\_\_\_ Account Number \_\_\_\_\_ Contact Name \_\_\_\_\_

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

Name of Company \_\_\_\_\_ Account Number \_\_\_\_\_ Contact Name \_\_\_\_\_

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

Name of Company \_\_\_\_\_ Account Number \_\_\_\_\_ Contact Name \_\_\_\_\_

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

Indicate the type of account you are applying for \_\_\_\_\_

**OPTIONS:**

15<sup>th</sup> PROX TERMS - 15th of the month following invoice. Payment accepted via cheque, credit card or online payment

CREDIT CARD - Credit card is authorized prior to shipping. No terms.

Alberta Tire Recycling Management Number (TRMA #) if applicable (ALBERTA ONLY) \_\_\_\_\_

As a Parts Canada dealer I am able to provide the required minimum \$5000.00 initial order and agree to purchase a minimum of \$5000.00 per year.

YES  NO

Language preference: English  Français

Please note that Parts Canada/Drag Specialties will obtain credit information either through a credit reporting agency or directly from other credit grantors. We reserve the right to:

- Periodically obtain such information and to provide credit information to a credit reporting agency or directly to other credit grantors.
- Charge 2.0% interest per month and 24% per annum on all overdue accounts.

Debt collection expenses must be reimbursed to Parts Canada prior to reopening an account that has gone to collections.

I/We agree to the above terms and conditions

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Print Name of Officer, Owner, Partner	Signature of Officer, Owner, Partner	Title	Date

Sent credit application to 403-291-6139 or [accountsreceivable@partscanada.com](mailto:accountsreceivable@partscanada.com)