



# CREDIT APPLICATION

**FAX, E-MAIL OR MAILTO:**

**FAX:**

(905) 608-9158  
Attn: Credit Department - New Accounts

**EMAIL:**

[doug.hyland@airjuice.com](mailto:doug.hyland@airjuice.com)

**MAIL:**

AirJuice Corporation.  
Attn: Credit Department - New Accounts  
4170 Sladeview Crescent., Unit 3  
Mississauga, Ontario, L5L 0A1

**PLEASE COMPLETE THIS ENTIRE APPLICATION AND SIGN IN THE INDICATED LOCATIONS**

Legal Name of Business/Company: \_\_\_\_\_

Corporation # \_\_\_\_\_

Trade Name: D/B/A \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal Code-ZIP: \_\_\_\_\_

Phone number (please include area code): \_\_\_\_\_

Fax number: \_\_\_\_\_

Person to Contact for Payment: \_\_\_\_\_

Time at address: Rent \_\_\_\_\_ Own \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Sales Tax Exempt number: \_\_\_\_\_

Years in Business: \_\_\_\_\_

Dun & Bradstreet number: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Annual Revenue: \$ \_\_\_\_\_

Estimated Monthly Purchase Requirements: \$ \_\_\_\_\_

Credit limit requested: \_\_\_\_\_



# CREDIT APPLICATION

**CREDIT CARD INFORMATION:** Visa\_\_ MasterCard\_\_ AMEX\_\_

Credit card number\_\_\_\_\_

Expiration date: \_\_\_\_\_

Credit card billing address:\_\_\_\_\_

\_\_\_\_\_

I am an authorized signer on above card and hereby give AirJuice Corporation permission to bill the credit card when verbally requested:

Name as it appears on card: \_\_\_\_\_

Signed: \_\_\_\_\_

**PRINCIPALS:**

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

E-mail address: \_\_\_\_\_

Owner Y \_\_\_\_\_ N \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

E-mail address: \_\_\_\_\_

Owner Y \_\_\_\_\_ N \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

E-mail address: \_\_\_\_\_

Owner Y \_\_\_\_\_ N \_\_\_\_\_



# CREDIT APPLICATION

## BANK INFORMATION:

Bank Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

Contact e-mail address: \_\_\_\_\_

Branch Address: \_\_\_\_\_

City: \_\_\_\_\_

Province/State \_\_\_\_\_ Postal Code/ZIP: \_\_\_\_\_

Account number: \_\_\_\_\_

## AUTHORIZATION

The undersigned authorizes release of all banking and credit information, both business and/or personal requested by AirJuice Corporation. This form may be reproduced or photocopied and a faxed copy shall be as effective consent as the original, which I have signed.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## TRADE REFERENCE INFORMATION:

1. Vendor/Reference Company: \_\_\_\_\_

Account #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal Code/ZIP: \_\_\_\_\_

Contact: \_\_\_\_\_ Contact e-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

2. Vendor/Reference Company: \_\_\_\_\_

Account #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal Code/ZIP: \_\_\_\_\_

Contact: \_\_\_\_\_ Contact e-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_



# CREDIT APPLICATION

3. Vendor/Reference Company: \_\_\_\_\_

Account #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal Code/ZIP: \_\_\_\_\_

Contact: \_\_\_\_\_ Contact e-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

This credit application and agreement is submitted by the undersigned authorized representative (hereinafter Customer) to **AirJuice Corporation**. (hereinafter Airjuice), to obtain trade credit. Customer agrees to make payment in full to AirJuice for all amounts due according to AirJuice's invoice(s). Customer also agrees to pay AirJuice, as interest, an amount equal to 2% per month, or the maximum provided by law (whichever is less) for invoice amounts that are past due. Should Customer default in any such payment(s), AirJuice shall have the right, without notice to Customer, to declare all invoice amounts immediately due and payable.

In the event AirJuice should commence any action or actions, or otherwise seek to enforce this agreement against Customer or any Guarantor, Customer agrees to pay reasonable legal fees, court and other expenses incurred by AirJuice, whether or not an action is filed. This agreement is not transferable or assignable without prior written consent of AirJuice. This agreement shall become effective upon acceptance by AirJuice. Customer agrees that all sales shall be governed by AirJuice's Standard Terms and Conditions of Sale, as stated on the invoice and shown in AirJuice's Product List, unless AirJuice and Customer have executed a separate agreement which specifically supersedes and replaces those terms and conditions. Customer and Customer's authorized representative signing this agreement hereby represent and warrant that the information provided in this application and in any and all additional documents, financial statements or other information furnished by the Customer to AirJuice is true and correct in all material aspects and contains all information necessary so that this application is not materially misleading. Customer acknowledges that AirJuice is relying on the accuracy of the information provided by Customer.

By executing this Application and Agreement, the Customer explicitly consents to allow AirJuice the use of their personal information pursuant to the *Protection of Personal Information and Electronic Documents Act* and our Privacy Policy.

This Application and Agreement shall be executed in and construed under the laws of the Province of Ontario. Venue and jurisdiction for any dispute arising under this Agreement shall be in the provincial and federal courts located in Toronto, Ontario.

Customer agrees to adhere to the credit service policies and procedures established from time to time by AirJuice.

Dated at: \_\_\_\_\_

as of this \_\_\_\_\_, day of \_\_\_\_\_, 20\_\_\_\_.

Signed by: \_\_\_\_\_

Name/Title: \_\_\_\_\_