



The Convenience Stores For Metal®

### CREDIT APPLICATION

Email to: [adminbc@metalsupermarkets.com](mailto:adminbc@metalsupermarkets.com)

Fax to: 604-513-9864

Legal Business Name: \_\_\_\_\_

Trade Name (if different from above): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Limited Co.  Partnership  Proprietorship  Years in business \_\_\_\_\_ Credit Limit Requested \$ \_\_\_\_\_

Name(s) of Principals: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact name for purchasing: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact name for payables: \_\_\_\_\_ E-mail: \_\_\_\_\_

Invoicing Preference (check one): by Mail  by Email  Are Purchase Orders required? Yes  No

Email address for invoices: \_\_\_\_\_ PST Exemption No. (if applicable): \_\_\_\_\_

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

Branch: \_\_\_\_\_ Tel: \_\_\_\_\_

Account Manager: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supplier References – Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_ **EMAIL or FAX:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**TERMS OF SALE are NET 30 DAYS** from the date of invoice. Interest on past due accounts is 2% per month. Charges for collection of past due accounts will be paid by the customer. Metal Supermarkets is committed to your privacy; information collected is kept confidential and will only be used to establish and maintain an account.

**I confirm that I have read and understand the terms of sale conditions and that all information on this application is true and correct. I authorize the release of credit information required to establish an account.**

Signature of authorized signing officer: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**Metal Ventures Inc.**

Operating Metal Supermarkets stores in the Metro Vancouver Area  
With locations in Burnaby, Langley and Richmond