



# TURNX TOOLS INC.

#16 - 7355 72 Street  
Delta, BC Canada V4G 1L5  
P: 604-940-9393 F: 604-940-3578  
turnxtools.com

## NEW ACCOUNT APPLICATION (CA)

**NET 30 TERMS**

### COMPANY INFORMATION

|                         |           |   |                  |
|-------------------------|-----------|---|------------------|
| Company Name:           |           |   |                  |
| Billing Address:        |           | Shipping Address:<br><input type="checkbox"/> Same as billing address |                  |
| City:                   | Province: | City:   | Province:        |
| Postal Code:            | Phone:    | Postal Code:  | Phone:           |
| Mobile:                 | Fax:      | Mobile:   | Fax:             |
| Primary Contact:        |           | GST/HST #:  |                  |
| Primary E-mail Address: |           | PST #:  |                  |
| Website:                |           | Courier Name:   | Courier Acct. #: |

### PAYMENT INFORMATION

|  |  |
|--|--|
| Accounts Payable Contact:  |  |
| A/P Phone:   | A/P Fax:   |
| A/P E-mail:  |  |
| I would like to receive my invoice(s) by: <input type="checkbox"/> A/P E-MAIL (as above) <input type="checkbox"/> A/P FAX (as above) |  |
| If paying by credit card, please fill out the following information: (additional 3% surcharge)                                       |  |
| Visa <input type="checkbox"/><br>Mastercard <input type="checkbox"/><br>AMEX <input type="checkbox"/>                                | Credit Card Number: _____<br>Cardholder Name: _____<br>Expiry Date (MM/YY): _____ CVV: _____ |

Additional Comments:

As an authorized representative, I/we, the undersigned, hereby apply for credit and affirm financial responsibility, ability and willingness to pay invoice(s) in accordance with the terms agreed (NET 30 DAYS). I/We declare that the information contained herein is true, accurate, and complete, provided to TURNX TOOLS INC. (The Company) for the purpose of determining the amount and conditions of credit to be extended. I/We authorize The Company to conduct a credit investigation as deemed necessary. I/We acknowledge that credit & terms is at the sole discretion of The Company, reserving the right to deny or reverse any credit decision if the information presented herein is understood to be false, incomplete, inaccurate, ineligible based on conducted credit investigation and/or payment history that does not meet the terms & conditions of The Company. In the event that the account is subjected to litigation for failure to abide by the aforementioned credit terms, I/we agree to pay all court costs, collection, interest, penalties, legal or any fees associated with the account in arrears.

Upon approval, TURNX TOOLS INC. will issue credit & NET 30 day terms to cover the first order. For all new accounts the maximum credit limit is \$4000 CAD. Further credit & payment terms will be determined & based on previous payment history, and/or the applicant providing supplementary information for credit report investigation and evaluation.

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

Send the completed New Account Application Form via email to sales@turnxtools.com or fax to 1-604-940-3578.

|                            |                     |
|----------------------------|---------------------|
| <b>FOR OFFICE USE ONLY</b> | Approved / Declined |
| Date Received: _____       | Signed: _____       |
| Comments: _____            |                     |