

MIRCONEX INC.

INDUSTRIAL & TRADE SUPPLY
20 HANLAN ROAD, UNIT 10
WOODBIDGE, ON L4L 3P6
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Form#: P013
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CREDIT APPLICATION		
Company Name:		D & B:
Billing Address:	Shipping Address:	
Telephone:	Telefax:	
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Other:		
Type of Business	Year Business Started:	
Accounts Payable Contact:	Purchasing Contact Person:	
Email Address:	Email Address For Invoices:	
List Officers, Partners, or Owners:		
1. Name:	Title:	
2. Name:	Title:	
Are purchase orders required? <input type="checkbox"/> Yes <input type="checkbox"/> No Tax Exempt? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Business References: (Please type or Print Legibly)		
1. Name:	Telephone:	
Address:	Telefax:	
2. Name:	Telephone:	
Address:	Telefax:	
3. Name:	Telephone:	
Address:	Telefax:	
ACKNOWLEDGEMENT:		
Our Terms: Net 30 Days		
<p>Applicant is an officer and/or authorized signatory of a corporation, or partnership, or limited company, or sole proprietorship, or any other entity, that acknowledges that the undersigned person hereby personally and unconditionally guarantees punctual payment as per specified terms herein to MIRCONEX Inc.. We understand the terms of sales to us are Net 30 Days from date of invoice. We further understand and agree that interest of 2% per month (24% per annum) may be charged on any and all invoices not paid within 30 days from date of invoice. We agree that all goods remain the property of MIRCONEX Inc. until paid for in full. Any and all returns are subject to the approval of MIRCONEX Inc. and may be subjected to a 20% re-stocking charge.</p>		
Authorized Signature: _____		Date: _____
Print Name and Title: _____		
For Mirconex Inc. Use Only:		
Account Number:	D & B Rating:	Credit Limit: