



CREDIT APPLICATION

FAX (1-866-496-1990) OR EMAIL (accounting@iecs.com)



ALL INFORMATION MUST BE COMPLETE FOR CREDIT TO BE CONSIDERED

CREDIT LIMIT REQUESTED: \$ _____

LEGAL NAME: _____

TRADE NAME: _____

BILLING ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

PHONE: _____ FAX: _____

*****NAMES OF ALL OFFICERS, PARTNERS, OR PROPRIETORS: *****

NAME: _____ TITLE: _____

NAME: _____ TITLE: _____

IF NOT INCORPORATED, PROPRIETORS SOCIAL INSURANCE# _____

****ACCOUNTING INFORMATION****

A/P CONTACT: _____ EMAIL: _____

HST REGISTRATION #: _____

BANK REFERENCE: _____ ACCT #: _____

CONTACT NAME: _____ PHONE #: _____

BANK ADDRESS: _____

****TRADE REFERENCES****

COMPANY NAME, A/R CONTACT	PHONE	FAX
_____	_____	_____
_____	_____	_____
_____	_____	_____

TERMS & CONDITIONS OF CREDIT:

- Terms of sale call for payment in full of all accounts thirty (30) days from date of invoice unless otherwise specified in writing by the seller. Default of payment will result in a 2% monthly interest charge (24% per annum) on all past due amounts. Customer does hereby authorize the Seller to conduct all credit investigations necessary for approval of this application. Materials will not be accepted for returns unless authorized by seller. No special/custom orders will be accepted for return. All returns are subject to inspection and restocking charges will apply. The applicant agrees to bear all costs incurred in collecting any unpaid amounts including but not limited to collection agency fees, legal fees and court costs.

PRIVACY POLICY & CONSENT:

- In connection with this application for credit, I/we consent that International Erosion Control Systems Inc./IECS Environmental Inc. be allowed to access all banking information and/or cause to be conducted on any personal investigation required (partnership and proprietorship only).
- The applicant acknowledges that International Erosion Control Systems may have collected personal information from me, as defined by the Personal Information Protection and Electronic Documents Act or other provincial legislation.
- I consent to the use of this information for the purposes of obtaining credit verification.

Print Name: _____ Title: _____

Signature: _____ Date: _____