



Supplying Solutions Today
For a Better Life Tomorrow

CREDIT APPLICATION

PLEASE PRINT

COMPANY NAME: _____

BUSINESS PHONE#: _____ CELL PHONE#: _____

STREET ADDRESS: _____

CITY/TOWN/PROVINCE: _____

POSTAL CODE: _____

PLEASE CHECK ONE OF THE FOLLOWING:

CORPORATION: _____ PARTNERSHIP: _____ SOLE PROPRIETORSHIP: _____

OWNER(S)/PRINCIPAL(S): _____

BILL TO ADDRESS: _____

SHIP TO ADDRESS: _____

ACCOUNTS PAYABLE CONTACT NAME: _____

EMAIL: _____

WEBSITE: _____

BUSINESS TYPE: _____

DATE BUSINESS ESTABLISHED: (MO./YR): _____

ESTIMATED MONTHLY CREDIT REQUIRED: _____

PURCHASE ORDER REQUIRED: _____

PRICED PACKING SLIPS: _____

PREFERRED SALESPERSON _____

TAX NUMBERS: P.S.T # _____

G.S.T # _____

BANK: _____

ADDRESS: _____

PHONE #: _____

BUSINESS CREDIT REFERENCES (NO BANKS)

WE ARE A MEMBER OF EQUIFAX CANADA CO.

1. _____ PHONE: _____ EMAIL: _____

2. _____ PHONE: _____ EMAIL: _____

3. _____ PHONE: _____ EMAIL: _____

Head Office

3570 Faithfull Ave,
Saskatoon SK, S7P 0E4
Ph. 306-242-1567

Branch Office

915 McDonald St
Regina, SK S4N 2X5
Ph. 306-352-7381

Branch Office

RR#2, Site 201, Comp 9
4120 5th Ave E
Prince Albert, SK, S6V 5P9
Ph. 306-764-6639

Branch Office

P.O. Box 1418
9802 Thatcher Ave
North Battleford, SK, S9A 3M1
Ph. 306-937-7741

WWW.AQUIFERDIST.COM

Saskatchewan Owned & Operated Since 1968



TERMS OF CREDIT

- A) All invoices are DUE AND PAYABLE 30 days from receipt of invoice. We reserve the right to refuse shipment to any account that has a past due balance.
- B) Monthly service charge will be charged on all accounts in arrears at the rate set by AQUIFER DISTRIBUTION LTD., which at present is at 2.0% per month (24.00% per annum).
- C) In the event of a disputed invoice the Customer must notify AQUIFER DISTRIBUTION LTD. in writing within (15) fifteen days of the invoice date by specifying the invoice number, the nature of the dispute and the amount under dispute. This information must be forwarded to our credit department for clarification.
- D) All overdue accounts are subject to C.O.D. (Cash on Delivery) terms.
- E) All items are F.O.B. (Free on Board) Saskatoon, Regina, North Battleford, or Regina, unless otherwise stated.
- F) Customer will pay all costs (including legal fees) incurred by AQUIFER DISTRIBUTION LTD. on the collection of overdue accounts.
- G) Inactive accounts will be removed after 3 years.

I, the undersigned, certify that the above information of terms is understood and agree that the usual credit inquiries may be made at any time regarding the credit hereby applied for. We/I, hereby authorize the company to whom this application is submitted, to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirements.

Date: _____ Signature: _____

Title: _____ Print Name: _____

GUARANTEE (Corporations, Partnerships, and Sole Proprietorship)

In consideration of Aquifer Distribution Ltd. (the "Suppliers") agreeing to supply goods on credit to _____ (the "Corporation"), I hereby guarantee (in my personal capacity) to pay all monies due and owing to the suppliers for goods sold and/or delivered to the Corporation, inclusive of all interest and service charges. DATED at the city of _____, in the province of _____ this ____ day of _____, 20__

Witness Signature: _____ Owner's Signature: _____

Witness Printed Name: _____ Owner's Printed Name: _____

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How did you hear about us?

- Digital Advertising
 Search Engine
 Social Media
 Email
 Radio
 Print Advertising
 Word of mouth
 Other _____

If you would like any additional staff included on the account, please fill out the information below.

Name:	Title	Office Number:	Cell Number:	Email:

Please let us know if you are interested in applying for an account with our subsidiary company, Clark's Supply & Service Inc. Our locations are in Warman, Emerald Park and Moose Jaw. We will email out our credit application to set up an account.

Email address: _____

FOR OFFICE USE ONLY

Application Received by: _____

Account Code: _____

Department: _____

Outside Salesperson: _____

Inside Salesperson: _____

Pricing: _____

Credit Limit: _____

Customer Type: _____

Approved by: _____

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