



1206 Ringwell Drive, Units# 5-6,
New Market, ON L3Y 8V9
Tel 905-830-9975 | Fax: 905-830-9989
www.laprairieinc.com

APPLICATION FOR CREDIT

COMPANY INFORMATION

LEGAL COMPANY NAME _____

TRADE NAME _____

BILLING ADDRESS _____

STREET ADDRESS _____

CITY _____ PROV _____ POSTAL CODE _____

TEL _____ FAX _____ TYPE OF BUSINESS _____

LEGAL ENTITY: CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP

ANTICIPATED MONTHLY PURCHASES FROM LAPRAIRIE \$ _____

DATE OF BUSINESS COMMENCED _____ PST EXEMPTION # (IF APPLICABLE) _____

PRINCIPAL INFORMATION

PRESIDENT _____ CONTROLLER _____

BUYER _____ A/P CONTACT _____

E-MAIL ADDRESS FOR: INVOICES STATEMENTS BOTH _____

OWNER PARTNER(S) OR SHAREHOLDER(S)	% OWNERSHIP	TEL	FAX
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CREDIT REFERENCES

PRESENT SUPPLIERS	CITY, PROVINCE	TEL	FAX
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BANK/FINANCIAL INSTITUTION

ADDRESS

BANK CONTACT _____

TEL: _____

BUSINESS ACCOUNT #: _____

TRANSIT #: _____

OPERATING LINE OF CREDIT: _____

CREDIT CARD LINE OF CREDIT _____



Terms and Conditions – Credit Agreement

IN CONSIDERATION OF LAPRAIRIE, A DIVISION OF WESCO DISTRIBUTION CANADA LP (HEREIN AFTER REFERRED TO AS LAPRAIRIE) PERMITTING THE PURCHASE OF GOODS AND SERVICES ON A CREDIT BASIS, THE PRINCIPAL AND APPLICANT HEREBY AGREE TO THE FOLLOWING TERMS AND CONDITIONS:

IT IS UNDERSTOOD AND AGREED THAT PAYMENT TERMS FOR LAPRAIRIE INVOICES ARE THIRTY DAYS FROM INVOICE DATE AND THAT UNLESS THERE ARE DIFFERENT OR ADDITIONAL TERMS AND CONDITIONS CONTAINED IN A MASTER AGREEMENT THAT MODIFIES LAPRAIRIE'S STANDARD TERMS, THE PRINCIPAL AND APPLICANT AGREES THAT THE SALES IS GOVERNED BY LAPRAIRIE'S STANDARD TERMS AND CONDITIONS AVAILABLE AT: <http://www.laprairieinc.com/sales-terms-and-conditions/> AND AS SUCH TERMS MAY BE UPDATED FROM TIME TO TIME, WHICH ARE INCORPORATED HEREIN BY REFERENCE AND MADE PART HEREOF, PLEASE CONTACT A LAPRAIRIE REPRESENTATIVE IF YOU REQUIRE A PRINTED COPY.

PAST DUE ACCOUNTS ARE SUBJECT TO A SERVICE CHARGE OF 2% PER MONTH (24% PER ANNUM). THIS RATE IS SUBJECT TO CHANGE UPON NOTICE BY LAPRAIRIE TO THE APPLICANT BY ORDINARY MAIL.

I/WE AGREE TO PAY ALL COLLECTION COSTS INCLUDING SOLICITOR COSTS ON A SOLICITOR AND CLIENT BASIS, WHICH MAY ARISE FROM NON-PAYMENT OF THE ACCOUNT.

LAPRAIRIE ACCEPTS PAYMENT ON ACCOUNTS WITH APPROVED TERMS, BY CHEQUE, EFT, ON-LINE BANKING, AND MOST MAJOR CREDIT CARDS. CREDIT CARD PAYMENTS ARE ACCEPTED ONLY AT POINT OF SALE, UNLESS OTHERWISE AGREED TO BY LAPRAIRIE IN ADVANCE.

I/WE AUTHORIZE LAPRAIRIE TO OBTAIN CREDIT REPORTS OR OTHER INFORMATION (INCLUDING FINANCIAL STATEMENTS) AS MAY BE DEEMED NECESSARY IN CONNECTION WITH THE ESTABLISHMENT AND MAINTENANCE OF A CREDIT ACCOUNT OR FOR ANY OTHER DIRECT BUSINESS REQUIREMENT. IN ASSESSING YOUR CREDITWORTHINESS AND EXTENDING CREDIT TO YOU, YOU HEREBY AUTHORIZE LAPRAIRIE TO DISCLOSE AND COLLECT YOUR PERSONAL INFORMATION TO AND FROM CREDIT REPORTING AGENCIES, CREDIT BUREAUS, FINANCIAL INSTITUTIONS, YOUR CREDITORS, OR TO AND FROM ENTITIES THAT YOU HAVE IDENTIFIED ON YOUR CREDIT APPLICATION FORM. YOU ARE NOT REQUIRED TO PROVIDE YOUR SOCIAL INSURANCE NUMBER TO US BUT IF YOU DO, IT WILL BE USED TO MATCH CREDIT BUREAU INFORMATION.

I/WE HEREBY COVENANT THAT THIS APPLICATION FOR CREDIT SHALL INURE TO THE BENEFIT OF YOUR SUCCESSORS, ASSIGNS & SUBSIDIARY COMPANIES AND SHALL APPLY WITH RESPECT TO GOODS SUPPLIED BY ANY OF THEM TO THE ABOVE NAMED CUSTOMER.

THIS CONTRACT IS DEEMED TO BE MADE IN THE PROVINCE OF THE LAPRAIRIE FINANCIAL SERVICE OFFICE IN RECEIPT OF THIS APPLICATION FOR CREDIT AND ANY BREACH OF THIS CONTRACT MAY AT THE ELECTION OF LAPRAIRIE BE LITIGATED IN ANY COMPETENT COURT IN CANADA.

I/WE AGREE THAT LAPRAIRIE MAY REJECT THIS APPLICATION AT ITS SOLE AND ABSOLUTE DISCRETION, AND SHALL HAVE THE RIGHT TO CANCEL THIS AGREEMENT AT ANY TIME WITHOUT NOTICE TO THE APPLICANT. I/WE AGREE TO HOLD LAPRAIRIE HARMLESS FOR ANY INCONVENIENCE WHATSOEVER CAUSED BY EITHER A TEMPORARY OR PERMANENT WITHDRAWAL OF CREDIT PRIVILEGES WHETHER OR NOT I/WE HAVE RECEIVED ANY ADVICE OF SUCH WITHDRAWAL.

IN CONSIDERATION OF LAPRAIRIE EXTENDING CREDIT TO THE PRINCIPAL AND APPLICANT, THE UNDERSIGNED PRINCIPAL CO-COVENANTOR SHALL BE JOINTLY AND SEVERALLY LIABLE AS PRINCIPAL DEBTOR AND NOT AS GUARANTOR OR SURETY FOR DUE PAYMENT OF ALL AMOUNTS ON MONEY PAYABLE BY THE ABOVE NAMED CUSTOMER TO LAPRAIRIE.

I CONSENT TO RECEIVE ELECTRONIC COMMUNICATIONS FROM LAPRAIRIE AND ITS AFFILIATES, (E.G. PROMOTIONS, PRODUCT INFORMATION). I UNDERSTAND THAT I CAN WITHDRAW MY CONSENT AT ANY TIME.

Yes No

Dated at _____ this _____ day of _____, 20 ____.
(City and Province)

X _____
Co-Covenator Signature

Witness

Print Name

Print Name

LAPRAIRIE Branch Number _____

LAPRAIRIE Sales Representative _____



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Date: _____

I/We _____ hereby authorize our Financial Institution to release a credit
(Name of Company of Individual)

report or financial information to: **LaPrairie** or their Financial Institution.

Bank/Financial Institution: _____

Transit #: _____

Account #: _____

Bank Telephone: _____

Bank Fax: _____

Authorized Signature

Name in Print

Title Position