

30 RIEL DRIVE
P.O. BOX 261
ST. ALBERT, ALBERTA
T8N 1N3
TEL (780)459-4491
FAX (780)459-4089

**PRO-WESTERN
PLASTICS LTD**



Dear Customer,

Thank you for your interest in opening a credit account with Pro-Western Plastics Ltd.

To assist us in the approval and setup of your account in a timely manner we request that you review and comply with the following when completing the enclosed credit application.

1. **If you prefer to submit your bank and trade references on a previously prepared list**, please insure that you complete the additional information requested on the application, as all information is required to setup your account correctly.
2. If you reside in a province where HST is applicable, you will be charged HST as per Revenue Canada on every invoice regardless of any previous exemptions you may have been offered by the Government of Canada.
3. **Insure that you include an authorized signature** on the bottom of our form. (Many banks require an authorized signature **on our form** in order to provide a reference)
4. **Fax the completed form to our credit department** at 780 459 4089
5. **Review the paragraphs below to insure you understand our approval process**

Due to the implementation of the privacy act, we find that we are encountering ever increasing delays in our credit approval process. Many companies are not willing to provide direct references, and several banks will only respond to references via mail. To resolve this issue, we now use D & B reporting as part of our credit application approval process. Therefore, **supplying us with your DUNS #** can greatly improve the time it takes to approve your account.

Occasionally, D & B reports provide insufficient information. In this case, or if you do not have a DUNS #, we will ask D & B to rebuild / build a file on your company. Should this occur a representative from D & B may contact your office requesting pertinent information, required to provide us with a complete report. The file building process can take D & B up to 7-10 business days to complete. For this reason, we will also contact your bank and trade references. Upon receipt of sufficient information from either D & B or our own investigation we will contact you in writing to advise of your account terms with Pro-Western Plastics Ltd.

We value your business and look forward to supplying your future requirements. If you have any questions regarding credit with Pro-Western Plastics Ltd. please contact our Credit Department, Monday through Friday between 8:00 a.m. and 4:00 p.m. mountain time @ 780 459 4491.

Respectfully,
Pro-Western Plastics Ltd

Darci Allan
Credit Department

CDN & US CREDIT APPLICATION

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PRO-WESTERN PLASTICS LTD



Pro-Western Plastics Ltd. Salesperson: Dale Marijke Robert Greg Shane Slade Jeff

Registered Company Name: _____

Billing Address: _____ City: _____

Prov/State: _____ Postal / Zip: _____ Phone: _____ Fax: _____

Shipping Address(es): _____

Shipping/Receiving Contact: _____ Phone: _____ Fax: _____

Please provide all authorized ship to addresses including contacts and phone #'s (include separate sheet if necessary)

FEDTAX ID#: _____ DUNS # _____

Canadian Companies with GST Exempt status must include a copy of Gov't Approval when submitting this application

Year Business established: _____ Requested Credit Limit: _____

HST Tax: As per Revenue Canada all customers will be charged HST on every invoice (*applies only to provinces where HST is applicable*)

ACCOUNTS PAYABLE INFORMATION

Contact: _____ Phone: _____ Fax: _____

E-mail: _____

(Invoices will be sent to the above email address)

PURCHASING INFORMATION

Mailing Address: _____
(If different than billing address)

Contact: _____ Phone: _____ Fax: _____

E-mail: _____

Do you purchase with PO #'s? Yes No If yes, is a physical PO required prior to release of your order? Yes No

What will be your primary use for our products? Resale, as is OR Packaging of _____

BANK INFORMATION

Bank: _____ Account #: _____ Contact: _____

Address: _____ Phone: _____ Fax: _____

TRADE REFERENCES

Vendor: _____

Phone: _____ Fax: _____ Contact: _____

Vendor: _____

Phone: _____ Fax: _____ Contact: _____

Vendor: _____

Phone: _____ Fax: _____ Contact: _____

In consideration for establishing a monthly account with Pro-Western Plastics Ltd., I (we) hereby agree to the terms of payment which shall be Net 30 days from the invoice date, unless otherwise specifically stated in writing by Pro-Western Plastics, and I (we), agree to accept a service charge of 1.5% per month, (18% per annum) on all balances which become overdue in accordance with these terms.

Authorized Signature: _____ Title: _____ Date: _____

"We pride ourselves on the quality of our work. However, in the unlikely event that any of Pro-Western's products prove defective for any reason whatsoever, including without limitation faulty workmanship or non-compliance with design or other criteria Pro-Western shall replace such product without cost to the customer, but in any and all events, Pro-Western's liability shall be strictly limited to such replacement and, without limiting the generality of the foregoing, in no event shall Pro-Western be liable for consequential or other claims or damages (including damages to third parties) howsoever arising."