



*Canadian Craftsmanship-Heirloom Quality*

## NEW Account Credit Application

To assist us in setting up your new account, please complete the following form and fax to 1-888-509-2184.

Legal Name of Firm \_\_\_\_\_

Trade Name (if other than above) \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Business Phone : ( ) \_\_\_\_\_

Business Fax: ( ) \_\_\_\_\_

Email \_\_\_\_\_

Owner (s) \_\_\_\_\_

Years in Business \_\_\_\_\_

Authorized Buyers \_\_\_\_\_

Have you ever had an account with us before?  No  Yes \_\_\_\_\_

Location :  Retail Centre  Office Space  Home  Other \_\_\_\_\_ ( under the name of )

Type of Operation :  Individual  Partnership  Corporation

### BANK REFERENCES

Bank Name \_\_\_\_\_ Account \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

### Please provided 3 ACTIVE TRADE REFERENCES

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Fax \_\_\_\_\_

### VISA / MC INFORMATION

Card # \_\_\_\_\_ Expiry Date \_\_\_\_\_

Name of Card Holder \_\_\_\_\_ Issuing Bank \_\_\_\_\_

### Guaranty

( Please print your name and your company's name in the underlined areas )

I, \_\_\_\_\_ personally guarantee the payment of all sums that \_\_\_\_\_  
(hereafter called "The Company") now or hereafter owe Cadman Manufacturing Co. Ltd., I agree to pay to  
Cadman Manufacturing Co. Ltd. all such sums. I agree that my liability under this guaranty shall not be  
affected by any change in terms of payment from The Company to Cadman Manufacturing Co. Ltd. .

Home Address \_\_\_\_\_ Date \_\_\_\_\_

Phone \_\_\_\_\_ Signature \_\_\_\_\_



CADMAN  
*Canadian Craftsmanship-Heirloom Quality*

## Ontario Retail Sales Tax Blanket Purchase Exemption Certificate

Blanket

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Ontario Vender's Permit Number \_\_\_\_\_

Reason for Claiming Exemption:  Purchase of Goods for Retail

I hereby claim exemption from the Ontario Retail Sales Tax under provisions of  
The Retail Sales Tax on the following goods or taxable services: \_\_\_\_\_

\_\_\_\_\_

### BLANKET

\_\_\_\_\_  
Signature of Authorized Person

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Authorized Person

### IMPORTANT

The person buying the goods or taxable service, or entering into a contract of insurance or benefits plan for which an exemption is claimed must complete this certificate and give it to the supplier.

The supplier is to keep this form as stated in the regulations. This Certificate is valid for four years if,  
(a) the box beside the word 'BLANKET' on this form is checked; and  
(b) the purchase order refers to this Purchase Exemption Certificate.

Every person who makes a false statement on a Purchase Exemption Certificate or misuses the Certificate is liable, if convicted, to a fine of not less than \$500 and an amount of not more than double the amount of tax that should have been paid, or that which was evaded, or to imprisonment for a term of not more than two years, or to both.