

<input type="checkbox"/> Edmonton CENTRIX Control Solutions LP 8803 58 Avenue Edmonton, Alberta Canada T6E 5X1 T 780.468.6950 F 780.469.5093 ar.ccs@centrixcs.com	<input type="checkbox"/> Port Coquitlam CENTRIX Control Solutions LP Unit 115, 1551 Broadway Street Port Coquitlam, British Columbia Canada V3C 6N9 T 604.942.0288 F 604.942.5858 ar.ccsbc@centrixcs.com	<input type="checkbox"/> Kelowna CENTRIX Control Solutions LP 1115 St. Paul Street Kelowna, British Columbia Canada V1Y 2C6 T 250.717.8813 F 250.717.8814 ar.kelowna@centrixcs.com
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Legal Name: _____

Operating Name (if applicable): _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Cell: _____ Fax: _____ Credit Limited Requested: _____

PST/GST Exemption No.: (attach certificate) _____ Website: _____

Accounts Payable Contact: _____ Email: _____

Does your company use purchase orders? Yes No Who has purchasing authority? _____

Electronic Invoice to Email Above? Yes No

1	Date Incorporated:	How long in business under present name?	Premises are: <input type="checkbox"/> Owned <input type="checkbox"/> Leased	How long at address?
	Principal Name (1):	Home Address:	Title:	Years:
	Principal Name (2):	Home Address:	Title:	Years:
	Principal Name (3):	Home Address:	Title:	Years:
	Type of Business:	What will materials be used for?	Name and Address of Parent/Affiliated Companies:	

2	Name of Bank 1:	Branch:	Phone:	Account No.:	Line of Credit/Mortgage:
	Trade Reference – Name:			Email:	Fax:
	Trade Reference – Name:			Email:	Fax:
	Trade Reference – Name:			Email:	Fax:

THE APPLICANT AFFIRMS THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE, CORRECT AND COMPLETE. THE APPLICANT UNDERSTANDS AND AGREES THAT ALL ACCOUNTS MUST BE PAID IN FULL WITHIN 30 DAYS OF THE INVOICE DATE (UNLESS OTHERWISE AGREED BY CENTRIX CONTROL SOLUTIONS IN WRITING) WITH INTEREST ON OVERDUE ACCOUNTS AT THE RATE STIPULATED ON THE INVOICE OR, IF NO RATE IS STIPULATED, AT A RATE EQUAL TO THE LESSER OF 24% PER ANNUM (CALCULATED AND COMPOUNDED MONTHLY) AND THE MAXIMUM LEGAL INTEREST RATE ALLOWABLE. IN ADDITION, APPLICANT AGREES TO PAY ALL COSTS OF COLLECTION ON OVERDUE ACCOUNTS INCURRED BY CENTRIX, INCLUDING REASONABLE LEGAL FEES, COURT COSTS AND OTHER EXPENSES. THESE TERMS GOVERN ALL PAYMENT TERMS ON FUTURE PURCHASE ORDERS.

THE APPLICANT ACKNOWLEDGES, CONSENTS, AND AGREES THAT CENTRIX MAY OBTAIN AND USE ANY CREDIT INFORMATION ABOUT THE APPLICANT THAT CENTRIX DEEMS NECESSARY, INCLUDING, BUT NOT LIMITED TO, BUSINESS CREDIT REPORTS AND INFORMATION FROM THE APPLICANT'S OTHER CREDITORS, AND THAT CENTRIX MAY AT ANY TIME DISCLOSE INFORMATION ABOUT ITS CREDIT EXPERIENCE WITH THE APPLICANT TO THIRD PARTIES.

THE APPLICANT HEREBY AUTHORIZES CENTRIX TO OBTAIN A CREDIT REPORT ON THE APPLICANT, AT ANY TIME AND FROM TIME TO TIME, FROM ANY CONSUMER REPORTING AGENCY, AND ACKNOWLEDGES AND AGREES THAT CENTRIX MAY TAKE ACTION BASED ON SUCH REPORTS (INCLUDING DENYING OR DISCONTINUING CREDIT TO THE APPLICANT).

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Date
Authorized Signatory
Printed Name
Position