

COMPANY INFORMATION

155 New Huntington Rd Woodbridge, ON L4H 3R6

- Thank you for taking the time to apply for a Metalworks Credit Account.
- To make sure we can process your application as quickly as possible, please ensure all your details are completed in full.
- The turnaround time for new accounts will depend on the credit information supplied and response time of credit contacts.
- $\bullet \ \text{Print, sign and mail this form to our office, or scan it and send it by email to } \underline{\text{onlineorders@metalworks.com.}}$

*Please note: All required fields (designated with an * after the field name) in each section must be filled in before submitting.

LEGAL BUSINESS NAME*					
TYPE OF BUSINESS*			HST#*		
ESTABLISHED DD*	YYYY*				
ADDRESS LINE 1*			ADDRESS LINE 2		
CITY*			PROVINCE		CANADA
ZIP/POSTAL CODE*			PHONE*		FAX
REQUESTED CREDIT LIMIT*			ESTIMATED MONTHLY SALES*		
ACCOUNTS PAYABLE INFORMATION					
FIRST NAME*			LAST NAME*		
EMAIL*			PHONE*		
COMPANY PRINCIPALS				1	
TITLE*	FIRST NAME*		LAST NAME*		
TITLE*	FIRST NAME*		LAST NAME*		
BANK INFORMATION (ONLY leave blank if Co	OD)				
STITUTION NAME*		_	TRANSIT#* ACCOUNT#*		ACCOUNT#*
ADDRESS LINE 1*			ADDRESS LINE 2*		
CITY*			PROVINCE CANADA		
ZIP/POSTAL CODE*			PHONE*		
BANK CONTACT				1	
NAME*	PHONE*		EMAIL*		
TRADE REFERENCES 1. FIRST NAME*					
FIRST NAME*			LAST NAME*		
EMAIL*			PHONE.		
2. FIRST NAME*	IRST NAME*		LAST NAME*		
EMAIL*			PHONE*	HONE*	
3. FIRST NAME*			LAST NAME*		
EMAIL*	EMAIL*		PHONE*		
. I/We expressly consent to METALWORKS CORP. required in obtaining credit from METALWORKS CORP. I/We declare that the information given on this This declaration is made for the purpose of obtaining the control of the purp	ORP. application is true and accure	ate in	every aspect.		
I consent to receive marketing communicatio and events.	n from Metalworks HVAC Sup	erstor	es, including updates abou	it products and	services, promotions, special offers, news
COMPANY SIGNING OFFICER SIGNATU	JRE (<mark>NO DIGITAL</mark>)			FULL N	NAME
DD*					



ONLINE ORDERING CONSENT FORM

155 New Huntington Rd Woodbridge, ON L4H 3R6

- Thank you for taking the time to register your secondary accounts with Metalworks.
- To make sure we can process your application as efficiently as possible, please ensure all your details are completed in full.
- The turnaround time for new secondary accounts will depend on the information supplied and response time of each contact listed.
- Print, sign and mail this form to our office, or scan it and send it by email to onlineorders@metalworks.com.
- *Please note: All required fields (designated with an * after the field name) in each section must be filled in before submitting.

PRIMARY ACCOUNT HOLDER INFORMATION	·	S		
FULL NAME*	TITLE*			
COMPANY NAME*				
EMAIL*	PHONE*	EXT		
SECONDARY ACCOUNT HOLDER INFORMATION (IF APPLIC	ABLE)			
FULL NAME*	TITLE			
EMAIL*	PHONE*	EXT		
By checking this box, I allow Metalworks to show product price	cing to this secondary account holder.			
SECONDARY ACCOUNT HOLDER INFORMATION (IF APPLICA	ABLE)			
FULL NAME*	TITLE			
EMAIL*	PHONE*	EXT		
By checking this box, I allow Metalworks to show product price	cing to this secondary account holder.			
SECONDARY ACCOUNT HOLDER INFORMATION (IF APPLICA	ABLE)			
FULL NAME*	TITLE			
EMAIL*	PHONE*	EXT		
By checking this box, I allow Metalworks to show product price	cing to this secondary account holder.			
TERMS & CONDITIONS 1. All Management, owners and account holders (primary & secondary product prices to anyone outside of their organization, including the calls or any other form of written, verbal or pictorial communication. 2. Any breach of price sharing will result in the individual responsible, revoked and their account suspended; 3. All Management, owners and primary account holders are solely rewell as for the deactivation of secondary accounts in a timely made. Metalworks is not responsible in any way for unauthorized purchases. All accounts will automatically be deactivated after 30 days of incommunication from the secondary accounts and confirm that the information of the secondary accounts and understood the secondary accounts and confirm that the information of the secondary accounts and confirm the secondary accounts and confirm that the information of the secondary accounts and confirm that the information of the secondary accounts and accounts and accounts and accounts and accounts and accounts accounts accounts and accounts accounts accounts and accounts acco	nrough screenshots, screen sharing, images, text man; and their organization, having their online ordering responsible for orders placed by secondary accournner; ses made by secondary account holders; activity or on credit hold. ormation provided is correct to the best of my know terms and conditions outlined above.	essages, phone g privileges at holders as wledge.		
FULL NAME	COMPANY SIGNING OFFICER SIGN	IATURE		

YYYY*

DD*

MM*