



# GT Hydraulic & Bearing Inc.

Box 1434 ~ Stettler, AB ~ T0C 2L0

Ph: 403.742.1707    Fx: 403.742.2490



Associate Dealer

## Application for Credit (Commercial Accounts)

Legal Name of Company:

Trade Name:

Mailing Address:

Shipping Address:

Phone Number:

Fax Number:

Length of Time in Business:

Head Office (if applicable):

Type of Business:       Corporation                       Partnership                       Sole Proprietorship

Principal Name:

Title:

Bank Reference:

Branch Location:

Bank Contact:

Bank Phone Number:

Accounts Payable Contact:

A/P Phone Number:

PO's Required? :       Yes                       No

Requested Credit Amount:

Please List 3 References (**not including Bank**):

1.

Phone:

Fax:

2.

Phone:

Fax:

3.

Phone:

Fax:

Signature:

Date:

Print Name:

Title:

# Terms & Conditions

1. All invoices, which are not paid upon presentation, are due and payable 30 days from statement date.
2. If the indebtedness is not paid within GT Hydraulic & Bearing Inc.'s credit terms applicant agrees to pay interest on the indebtedness at the rate of 2% per month (24% per annum).
3. Applicant states that all the information provided by the applicant is true and correct.
4. The Applicant agrees that GT Hydraulic & Bearing Inc. shall be entitled to review and evaluate on an annual basis, the terms herein and the financial performances of the customer. The customer shall, from time to time, upon request, provide GT Hydraulic & Bearing Inc. with such information.
5. No credit will be granted without signatures.

I/we understand and agree to comply with GT Hydraulic & Bearing Inc.'s terms and conditions as stated, and give my/our permission for a full credit investigation pertaining to my/our and/or company credit and financial responsibility.

Signature:

Date:

Print Name:

Title:

Other Comments or Information: