



General Information

DATE
FORM SUBMITTED BY
TELEPHONE NUMBER
FAX NUMBER
TITLE
EMAIL ADDRESS

Company Information

EXACT LEGAL COMPANY OR CORPORATE NAME
DOING BUSINESS AS
BILLING ADDRESS (STREET, CITY , PROVINCE, POSTAL CODE)
A/P CONTACT NAME & (IF DIFFERENT THAN ABOVE)
A/P TELEPHONE (IF DIFFERENT THAN ABOVE)
SHIPPING ADDRESS, ONLY IF DIFFERENT FROM BILLING (STREET, CITY , PROVINCE, POSTAL CODE)

Ownership Information

BUSINESS IS A (PLEASE CIRCLE) CORPORATION SOLE PROPRIETORSHIP		
YEAR STARTED	# OF EMPLOYEES	PROVINCE OF INCORP.
HST #		
FULL NAME OF OWNER		
TITLE	ARE YOU A SUBSIDIARY? IF SO, LIST PARENT	
DO YOU HAVE AN AFFILIATED OR RELATED COMPANY? IF SO, LIST HERE		

Banking Information

BANK NAME	CITY	PROVINCE
BANK ADDRESS (INCLUDE POSTAL CODE)		
BANK ACCOUNT #		
DATE OPENED DD/MM/YY	CONTACT NAME	
CONTACT TITLE #	CONTACT PHONE #	CONTACT FAX #
CONTACT EMAIL ADDRESS		

Sales Information

ORDER <input type="checkbox"/> YES PENDING? <input type="checkbox"/> NO	ORDER PENDING AMT.	ANTICIPATED MONTHLY \$
REQUESTED CREDIT LIMIT	SALES REP.	

Credit Reference Information (3)

NAME OF COMPANY	CONTACT NAME
CONTACT ADDRESS (STREET, CITY , PROVINCE, POSTAL CODE)	
CONTACT TITLE	CONTACT EMAIL
CONTACT PHONE	CONTACT FAX
NAME OF COMPANY	CONTACT NAME
CONTACT ADDRESS (STREET, CITY , PROVINCE, POSTAL CODE)	
CONTACT TITLE	CONTACT EMAIL
CONTACT PHONE	CONTACT FAX
NAME OF COMPANY	CONTACT NAME
CONTACT ADDRESS (STREET, CITY , PROVINCE, POSTAL CODE)	
CONTACT TITLE	CONTACT EMAIL
CONTACT PHONE	CONTACT FAX

Disclosure & Legal Information

I/We, the undersigned hereby agrees to be bound by the terms and conditions contained herein, the Standard Terms and Conditions of Credit, Sale or Other Supply (as may be amended, supplemented or replaced from time to time) and the terms of sale listed on an invoice or approved purchase order of Bamford Produce Company Limited (collectively hereinafter referred to as "Bamford"), and all other documents related to the arrangements between the undersigned and Bamford as amended, supplemented or replaced from time to time by Bamford or agreed to in writing by Bamford (the "Documents").

I/We hereby authorize and consent to the collection, use and disclosure of any credit or other personal information about me at any time, from, to or with any credit bureau, reporting agency, credit grantor or insurer for the purpose of assessing my present and ongoing credit-worthiness in connection with the above application.

SIGNATURE	DATE MM/DD/YY
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