



645 Belfast Road, Condo #2
Ottawa, Ontario, K1G 0Z4
(613) 244-0030 Voice
(800) 267-7707 Voice Toll Free
(613) 244-6768 Fax
(800) 523-5210 Fax Toll Free
Web Site: www.airfast.ca
Email: info@airfast.ca

Your Company name:
Invoice Mailing Address:
City: Province: Postal Code: Tel:
Payables contact: Fax:

Owner: Owner:
Address: Address:
City: P.C.: City: P.C.:
Tel: Tel:

If exempted from Provincial Sales Tax, please provide signed exemption certificate.
Otherwise, you will be charged accordingly.

How long in business: years, at this present location: years.
How many people working in the company (owner included): people.
Your main customer type(s):

Please supply us with the names of 3 of your credit suppliers (fax numbers please):

Supplier name: Contact:
Tel: Fax:

Supplier name: Contact:
Tel: Fax:

Supplier name: Contact:
Tel: Fax:

Your banking institution:
Address: City: Prov.:
Contact: Tel:



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We will be mailing you all your invoices.

Do you need a statement at month end? yes no

Credit limit you would need from us: \$ _____

Your payment terms:	<input type="checkbox"/> Net 30 days from invoice date. <input type="checkbox"/> Net 45 days from invoice date. <input type="checkbox"/> The 25 th of the following month. <input type="checkbox"/> Other _____
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Who places orders:

Name: _____ Tel: _____ Fax: _____
 Name: _____ Tel: _____ Fax: _____
 Name: _____ Tel: _____ Fax: _____

Who is allowed to pick up orders:

Name: _____
 Name: _____
 Name: _____

Shipping address: _____
 _____ City: _____ Prov.: _____
 P.C.: _____ Receiver: _____
 Tel: (____)-____-____ Fax: (____)-____-____

This information is confidential. Please complete fully.