|  |  |
| --- | --- |
|  | **CUSTOMER ACCOUNT APPLICATION**  **Send to:** [**recevables@hebdraulique.ca**](mailto:recevables@hebdraulique.ca)  **Visit our website:** [**www.hebdraulique.ca**](http://www.hebdraulique.ca) |
| **Montréal**•**Pointe-Claire**•**Laval**•**Chicoutimi**•**Alma**•**Mirabel**•**Terrebonne**•**Boucherville**•**Québec**•**Brossard**  **8410 Champ d’eau, Saint-Léonard, QC, H1P 1Y3 • Tel.: 514-327-5966 • Fax: 514-327-6966 • Toll Free: 1-800-461-5966** | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Business Name | | | |  | | | | N.E.Q. |  | |
| Phone | | | |  | | Nature of Business | |  | | |
| Adress | |  | | | | | | | | |
| City |  | | | | | | Province |  | Postal Code |  |
| Delivery Adress  (if different) | | | Adress | |  | | | | Province |  |
| City | |  | | | | Postal Code |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Position** | **Name** | **Phone** | **Ext.** | **Fax** | **Email** |
| *Purchasing* |  |  |  |  |  |
| *Act. Payables* |  |  |  |  |  |
| *Senior Manager* |  |  |  |  |  |
| **Email address to receive invoices** | |  | | | |
| **Email address to receive statements** | |  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| GST Number |  | QST Number |  |
| Financial Institution |  | Account Number |  |
| Branch Location |  | Phone |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Reference from three (3) current suppliers. Please provide business name and contact person.** | | | |
| Business |  | Email |  |
| Contact |  | Phone |  |
| Business |  | Email |  |
| Contact |  | Phone |  |
| Business |  | Email |  |
| Contact |  | Phone |  |

1. Any sale of products or services is subject to Hebdraulique Inc.’s General Terms and Conditions of Sale. The undersigned hereby acknowledges having received and read said General Terms and Conditions of Sale

(<https://www.hebdraulique.ca/DATA/TECHNIQUECATDOC/21~v~conditions-generales-de-vente.pdf>).

1. The undersigned agrees to notify Hebdraulique Inc. by registered mail in the event of any change in ownership, shareholders, or partners of the above-mentioned business.
2. The undersigned declare that the information above, given in order to obtain credit, are true and exact. He acknowledges that this account application is made on his personal behalf as well as on behalf of the above-mentioned business. He agrees to grant his joint and several surety and guarantee for any debts that may be created by the business toward Hebdraulique Inc. and hereby renounces to the benefits of discussion and division.
3. The undersigned authorizes any person, any financial information service and any other credit provider to disclose to Hebdraulique Inc. all information requested by the latter, from time to time, in order to validate the information provided herein, and further authorizes the exchange of credit information with third parties at all times for the purposes of validating solvency and for fraud investigations.
4. Opening the account is conditional to Hebdraulique Inc.’s approval.

**Accepted by:**

Name & residential adress of signatory (must be one authorized owner, partner, or director):

Name:  Position:

Adress:  Phone:

Date:  **AUTHORIZED SIGNATURE:**

SIGNED THIS DAY, ON BEHALF OF THE ABOVE-MENTIONED BUSINESS AS WELL AS PERSONALLY AS SURETY AND GUARANTOR OF THE BUSINESS’S OBLIGATIONS.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **RESERVED FOR ADMINISTRATION** | | | | | | | |
| Client Code |  | Credit Limit |  | Credit Code |  | Discount Level |  |
| Sales Rep. |  | Region |  | Type |  | Account Start Date |  |