

- 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.
- 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.

COMPANY INFORMATION

LEGAL BUSINESS NAME*	
TYPE OF BUSINESS*	HST#*
ESTABLISHED DD*	MM* 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

TITLE*	FIRST NAME*	LAST NAME*
TITLE*	FIRST NAME*	LAST NAME*

BANK INFORMATION (ONLY leave blank if COD)

INSTITUTION NAME*	TRANSIT#*	ACCOUNT#*
ADDRESS LINE 1*	ADDRESS LINE 2*	
CITY*	PROVINCE CANADA	
ZIP/POSTAL CODE*	PHONE*	

BANK CONTACT

NAME*	PHONE*	EMAIL*
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TRADE REFERENCES

1.	FIRST NAME*	LAST NAME*
	EMAIL*	PHONE*
2.	FIRST NAME*	LAST NAME*
	EMAIL*	PHONE*
3.	FIRST NAME*	LAST NAME*
	EMAIL*	PHONE*

1. I/We expressly consent to METALWORKS CORP. or VERI-CHEQUE LTD. or NFP CANADA CORP., to obtain any reports containing credit or personal information that is required in obtaining credit from METALWORKS CORP.
2. I/We declare that the information given on this application is true and accurate in every aspect.
This declaration is made for the purpose of obtaining credit from METALWORKS CORP and will remain confidential. ©2020 METALWORKS HVAC SUPERSTORES. ALL RIGHTS RESERVED.

☐ Sign up for our email updates and you'll get exclusive access to our monthly promotions, events, trainings, product updates and MORE!

COMPANY SIGNING OFFICER SIGNATURE (NO DIGITAL)

FULL NAME

DD*	MM*	YYYY*
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- 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

FULL NAME*	TITLE*	
COMPANY NAME*		
EMAIL*	PHONE*	EXT

SECONDARY ACCOUNT HOLDER INFORMATION (IF APPLICABLE)

FULL NAME*	TITLE	
EMAIL*	PHONE*	EXT

By checking this box, I allow Metalworks to show product pricing to this secondary account holder.

SECONDARY ACCOUNT HOLDER INFORMATION (IF APPLICABLE)

FULL NAME*	TITLE	
EMAIL*	PHONE*	EXT

By checking this box, I allow Metalworks to show product pricing to this secondary account holder.

SECONDARY ACCOUNT HOLDER INFORMATION (IF APPLICABLE)

FULL NAME*	TITLE	
EMAIL*	PHONE*	EXT

By checking this box, I allow Metalworks to show product pricing to this secondary account holder.

TERMS & CONDITIONS

1. All Management, owners and account holders (primary & secondary accounts) are prohibited from revealing or sharing product prices to anyone outside of their organization, including through screenshots, screen sharing, images, text messages, phone calls or any other form of written, verbal or pictorial communication;
2. Any breach of price sharing will result in the individual responsible, and their organization, having their online ordering privileges revoked and their account suspended;
3. All Management, owners and primary account holders are solely responsible for orders placed by secondary account holders as well as for the deactivation of secondary accounts in a timely manner;
4. Metalworks is not responsible in any way for unauthorized purchases made by secondary account holders;
5. All accounts will automatically be deactivated after 30 days of inactivity **or on credit hold**.
6. I agree to set up my secondary accounts and confirm that the information provided is correct to the best of my knowledge.

By checking this box, I agree to have read and understood the terms and conditions outlined above.

Sign up for our email updates and you'll get exclusive access to our monthly promotions, events, trainings, product updates and MORE!

FULL NAME			COMPANY SIGNING OFFICER SIGNATURE
DD*	MM*	YYYY*	