



SUTCO CONTRACTING LTD
 #104 – 2374 Bering Rd
 West Kelowna BC V4T 3J6
 Ph: 778-754-4021
 F: 778-754-4025
www.sutco.ca

APPLICATION FOR CREDIT

Legal Name: _____ DBA: _____

Address: _____

City, Province, Postal Code: _____

Email Address for invoices: _____

Billing Address (If different): _____

City, Province, Postal Code: _____

Phone: _____ Fax: _____

Nature of Business: _____ Date Opened: _____

Corporation Partnership Proprietorship

Banking Information

Bank Name: _____ Fax or Email: _____

Address: _____

Contact Name: _____ Account Number: _____

Principals

Owners, Principals, Directors

Name: _____ Title: _____

Phone: _____ Email: _____

Name: _____ Title: _____

Phone: _____ Email: _____

I/We hereby request to establish credit privileges with Sutco Contracting Ltd, and agree to pay for all purchases and labour in accordance with the terms NET 30 DAYS. I/We further agree to pay a service charge on any amounts past due, calculated at 2% per month (24% per annum). I/We certify the above information to be correct and authorize Sutco Contracting to obtain credit reports or other information as deemed necessary on the applicant or its principals in connection with the maintenance and collection of the credit account or for any other business purposes. Payment of any balance owing to your company is personally guaranteed by me.

Signed this _____ day of _____, 2018.

Signed: _____ Title: _____

Trade References

1. Name of Company & FAX #: _____

Contact Name & Email: _____

2. Name of Company & FAX #: _____

Contact Name & Email: _____

3. Name of Company & FAX #: _____

Contact Name & Email: _____

Terms Net 30 Days

Accounts Payable Contact: _____ Phone: _____

Accounts Payable Email: _____

Billing Currency: CDN USD

PST EXEMPT or PRORATE #: _____

Copy of BOL/POD required with the invoice? YES NO

In alignment with Sutco’s commitment to the environment and to control administrative costs our preferred method of receiving payment is Electronic Funds Transfer (EFT). Will you be paying via EFT? YES NO

Important Contact Information

Who should be our primary contact for shipment related communication?

Name: _____

Email: _____

Phone: _____

To Submit:
Scan completed pages & email to - Charly.kole@sutco.ca
Or Fax - 778-754-4025
REMIT PAYMENTS TO – SUTCO CONTRACTING LTD