

## Business Information

Business Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Province: \_\_\_\_\_  
D & B #: \_\_\_\_\_  
Tax Exemption #: \_\_\_\_\_  
Federal Tax ID #: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Internet Address: \_\_\_\_\_

Date Established: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

## Bank Reference

Does your company use any of the following for purchases:

Visa Acct: \_\_\_\_\_  
MasterCard Acct: \_\_\_\_\_  
AMEX Acct: \_\_\_\_\_

Preferred Carrier & Account #: \_\_\_\_\_

Bank Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Province: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Fax: \_\_\_\_\_

List All Applicable Account #s: \_\_\_\_\_

## Main Suppliers

Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Province: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Province: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Province: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Fax: \_\_\_\_\_

I authorize the release of any and all Credit/Banking Information as required by and to Hunter Wire Products Ltd.  
I agree to Net 30 days payment terms.

**Signature & Title:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Hunter Wire Products Ltd**  
**60 Heaton Ave., Winnipeg, MB R3B 3E3**  
**Toll Free 1-800-665-0237 Fax 1-204-943-6888**