Credit Application and Agreement

Spicers Canada ULC

APPLICANT COMPANY INFORMATION

Full Legal Business Name: _____ Trade Name: _____

Billing Address: _____
Street Address City Province Postal Code

Ship to Address: _____
Street Address City Province Postal Code

Phone: _____ Fax: _____ Email: _____ Web Site: _____

Estimated Monthly Sales: _____ Credit Line Requested: _____ A/P Contact: _____

Spicers Sales Representative: _____ Business Industry _____ Date Business Established _____

Please select one: SOLE PROPRIETORSHIP ☐ PARTNERSHIP ☐ CORPORATION ☐ Number of Employees: _____

PROVINCIAL SALES TAX REGISTRATION #: _____

PRINCIPALS

Full Name: _____ Title: _____ Ownership: _____ %

Home Address: _____ Phone: _____ S.I.N: _____ Date of Birth: _____

Full Name: _____ Title: _____ Ownership: _____ %

Home Address: _____ Phone: _____ S.I.N: _____ Date of Birth: _____

TRADE REFERENCES

Name: _____
Address Phone Fax / Email

Name: _____
Address Phone Fax / Email

Name: _____
Address Phone Fax / Email

FINANCIAL STATEMENTS

If credit line requested is greater than $50,000, please provide two (2) prior fiscal year and recent interim fiscal year to date financial statements.
The financial statements must include at a minimum Balance Sheet and Income Statement and, if available, auditor's opinion and footnotes.

SPICERS CANADA ULC TERMS AND CONDITIONS OF SALE

COMMERCIAL PRINTERS - PAPER, GRAPHICS, INDUSTRIAL AND SIGN & DISPLAY PRODUCTS:

1% - 15th MONTH FOLLOWING - NET END OF MONTH FOLLOWING INVOICE DATE.
Etransfer payments to be remitted to etransfers@spicers.ca

Exclusions: EQUIPMENT, SOFTWARE, SERVICES, FREIGHT, PARTS AND LABOUR are not subject to early payment discount.

I/we hereby certify that the information contained in this credit application is true and complete. I/we acknowledge and recognize that Spicers Canada ULC ("Seller") has legitimate purpose for requiring the information contained in this credit application and the "Seller" will rely on the information to establish, extend or renew credit. I/we authorize "Seller" to collect, disclose, retain and use all relevant information and data, including personal information, furnished by me/us or any other person, including credit reporting agencies, bank references, relating to the present application or pertaining to my credit responsibility. I/we undertake to settle all monies owing within the payment terms of this account as stated above. Failure to pay within these terms will result in the account being placed on credit hold and possible terms being revoked and placed on a permanent C.O.D. basis. Unpaid balances that are past due (i.e accounts that have not been paid by end of the month following), will be subject to service charge of 1.5% per month (19.56% per annum, compounded monthly). I/we hereby agree and guarantee to pay all reasonable collection costs and legal fees incurred by "Seller" in enforcing this agreement and authorizations or in the event of non-payment. I/we agree that title to the goods shall remain with Spicers until payment of the invoice relating to the goods is made in full by the debtor. Spicers reserves the right to deny and revoke all credit privileges and to change these terms and conditions of sale without notice. Full terms and conditions are available on the Spicers website (www.spicers.ca).

SIGNATURE (1) _____
(DIRECTOR / PARTNER / PROPRIETOR) DATE

SIGNATURE (2) _____
(DIRECTOR / PARTNER / PROPRIETOR) DATE

BANK INFORMATION

Bank Name: _____
Street Address City Province Postal Code

Contact: _____ Phone: _____ Fax: _____

Savings Account Number: _____ Transit Number: _____

Chequing Account Number: _____ Transit Number _____

AUTHORIZATION TO RELEASE CREDIT INFORMATION TO SPICERS CANADA ULC

Spicers Canada ULC, our supplier, is in the process of establishing/renewing credit information for the purpose of extending credit to us.
To assist us in obtaining favourable credit terms with Spicers Canada ULC in their credit investigation, we hereby authorize you to release credit information to them.

Authorized Signature: _____ **Date**: _____ **Title:** _____

PERSONAL GUARANTEE

In consideration of the credit heretofore or hereafter granted by Spicers Canada ULC ("Creditor") to _____ ("Debtor") the undersigned hereby conditionally guarantees to Creditor full payment when due of any indebtedness of Debtor for (i) goods heretofore or hereafter sold or consigned to, or work-in-process identified for, Debtor by Creditor or (ii) services heretofore or hereafter performed for Debtor by Creditor, together with lawful interest from date due and all expenses of collection, including court costs and reasonable attorney's fees. This guarantee shall be directly enforceable against the undersigned without first resorting to any remedies against Debtor. This guarantee shall be a continuing guarantee and shall remain in full force and in effect until undersigned gives written notice, by certified or registered mail, to Creditor to extend no further credit on the security of this guarantee. Such notice shall be ineffective as to any obligation (billed or unbilled) existing at the time such notice is received by Creditor. The undersigned hereby assents to all terms and conditions made or to be made with Creditor by Debtor. Any indulgences, renewals or extensions of any indebtedness guaranteed hereby shall not release the undersigned as a guarantor hereunder. Reference to undersigned includes each and all of the undersigned and they shall be jointly and severally liable thereunder. This guarantee shall be for the benefit of the Creditor, its successors and shall be binding upon the undersigned and their assigns, heirs, executors and other legal representatives. Being directors / partners / proprietors of the business, I/We do hereby unconditionally guarantee the payments of any debt incurred / owned by the debtor to Spicers Canada ULC. This guarantee shall extend to a jointly and severally personal guarantee.

Intending to be legally bound hereby, the undersigned have executed this guarantee this ____ day of _____ , 20 ____

GUARANTOR (1): _____
PRINT NAME SIGNATURE ADDRESS

GUARANTOR (2) : _____
PRINT NAME SIGNATURE ADDRESS

WITNESS: _____
PRINT NAME SIGNATURE ADDRESS

*PLEASE NOTE: THE PROVINCE OF ALBERTA REQUIRES ALL PERSONAL GUARANTEES TO BE NOTARIZED.

Please email completed application to **creditanalyst@spicers.ca**
or fax to **1-905-265-1942**