



PROCORE INTERNATIONAL RADIATORS CREDIT APPLICATION

EMAIL TO: admin@procoreradiators.com

FAX TO: (250)378-9235

COMPANY NAME: _____

PHONE #: _____ FAX #: _____

BILL TO ADDRESS: _____ SHIP TO ADDRESS: _____

TYPE OF BUSINESS: Corporation____ Partnership____ Proprietorship____ Other____

DATE ESTABLISHED: _____ Credit Amount Requested: _____

OWNER(S): _____

CONTACT NAME(ACCOUNTS PAYABLE): _____

BANK: _____ ACCOUNT #: _____

BANK PHONE #: _____ ACCOUNT MGR: _____

CREDIT REFERENCES

COMPANY NAME	PHONE #	FAX #

CREDIT TERMS/CONDITIONS:

1. It is hereby agreed that any invoices will be payable within thirty (30) days from the billing date.
2. It is hereby understood and agreed that an investigation of your credit history may be carried out in conjunction with this application.
3. Delinquent accounts are subject to cancellation without notice with subsequent third party action.
4. It is hereby understood and agreed to that should these terms/conditions be altered in any way, this application will be declined.
5. It is understood that the Credit References provided above may be used to determine the creditworthiness of the customer.

Signature & Title of Signing Officer

Name (Print Clearly)

OFFICE USE ONLY

APPROVED BY: _____ DATE: _____

CREDIT LIMIT APPROVED: _____