



MANUCOMP

Credit Application

7471 Islington Avenue
Toronto, Ontario, Canada
L4L-1W2

Date _____

Phone : 416-484-0781

Fax : 416-946-1267

Toll Free : 1-866-440-1115

Company Name _____

Address _____

Owners Name _____

City _____ State _____

Postal / Zip Code _____ Phone Number _____

Fax Number _____

Type of Business Corporation Partnership Proprietorship Other

Date Established _____

Credit Terms

Terms are C.O.D./ Net 7, Net 14, & Net 30.

Bank References

Name _____

Account Number _____

Address _____

City _____

Province / State _____

Postal / Zip Code _____

Phone _____

Trade References

Name _____ Address _____ Account # _____

City _____ Province / State _____ Phone # _____

Name _____ Address _____ Account # _____

City _____ Province / State _____ Phone # _____

Name _____ Address _____ Account # _____

City _____ Province / State _____ Phone # _____

I have read and fully understand the credit terms above. I further acknowledge that the information being submitted is complete, correct and true.

Date _____ **Print Name** _____

Signature _____