

Infomicro Technology Inc.

110-12815 Clarke Place, Richmond, B.C. V6V 2H9
Tel: (604) 276-9780 Fax: (604) 248-1131 Email: sales@infomicro.ca

Account Application Form

Legal Business Name (same as business license) _____ President/Owner _____

DBA (Doing Business As) _____ Contact Person Of Account Payable _____

Shipping/Billing Address (No P.O. Boxes please) _____ Name of Purchaser _____

City _____ Email Address _____

Province _____ Postal Code _____ Business Website Address _____

Business Phone Number _____ Annual Sales _____

Business Fax Number _____

This company is a Sole Proprietorship Partnership Corporation

GST# _____ PST# _____

Date Business was founded _____ Number of Employee(s) _____

Bank References:

Bank Name _____ Account Number _____

Street _____ City _____ Postal Code _____

Trade References:

Business Name _____ Phone No. _____ Fax No. _____ Contact Person _____

Business Name _____ Phone No. _____ Fax No. _____ Contact Person _____

Business Name _____ Phone No. _____ Fax No. _____ Contact Person _____

I hereby certify the above information to be correct. We understand that all products are shipped without insurance unless otherwise specified and all shipping losses and damages are our responsibility. Please attach a copy of void cheque and PST certificate with this application form.

Date _____ Authorized Signature _____

Title _____ Printed Name _____