

# Application for Account

## Canuck Craft Distributing Inc.

2753 Charlotte Road, Unit 1AA, Duncan, BC V9L 5J2 Canada

Phone: 1.877.748.8054 Fax: 1.250.748.8074 email: info@canuckcrafts.com

<b>Contact Information</b>		<b>Billing Information</b> <input type="checkbox"/> Address and phone same	
Business Name:		Business Name:	
Primary Contact:		Billing Contact:	
Mailing Address:		Mailing Address:	
City, Prov. Post Code:		City, Prov. Post Code:	
Phone:	Fax:	Phone:	Fax:
e-mail:		email:	
Website:			
<b>General Company Information</b>			
Federal Tax ID number:		Owner Name:	
Business License: (copy required)		Title:	
Type of Business: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Not for profit <input type="checkbox"/> Govt Agency / Department			
Business operation	<input type="checkbox"/> Home Based <input type="checkbox"/> Educational / Art School	<input type="checkbox"/> Internet Sales <input type="checkbox"/> Club or Interest Group	<input type="checkbox"/> Retail Store (Bricks and Mortar) <input type="checkbox"/> Other:
Terms - Visa, Mastercard or Paypal	Indicate preferred shipping method: <input type="checkbox"/> Canada Post <input type="checkbox"/> Fedex <input type="checkbox"/> Purolator <input type="checkbox"/> Other _____	Freight: Actual freight charges will apply - payment due upon notification, before shipping	
<b>Business References - (optional, if web site provides details of business activities)</b>			
Business Name:		Business Name:	
Address:		Address:	
Contact Name:		Contact Name:	
Phone Number:		Phone Number:	
Relationship:		Relationship:	
Years known:		Years known:	
<b>Business Description - tell us about your business, so we can serve you better</b>			
<b>Signature &amp; Authorization</b>			
The signature below represents and warrants that (a) the party signing below is an authorized representative of the company/business and (b) that the information provided herein is a complete and accurate. Any misrepresentation or fraudulent information provided, will be the basis for default under this agreement.			
By signing this form, I authorize Canuck Craft Distributing Inc. to confirm my business status. Approval or rejection of this application is solely at the discretion of Canuck Craft Distributing Inc.			
Signature:		Date:	
Print Name:		Business Title:	