

**Allworld Packaging Supplies Ltd.**

1023 Clark Drive, Vancouver, BC V5L 3K1

**CREDIT APPLICATION**

Full Legal Company Name \_\_\_\_\_

Trade Name (DBA) \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Shipping Address \_\_\_\_\_

Purchaser \_\_\_\_\_ E-mail Address \_\_\_\_\_ ext# \_\_\_\_\_

A/P Contact \_\_\_\_\_ E-mail Address \_\_\_\_\_ ext# \_\_\_\_\_

H.S.T. # \_\_\_\_\_ Website \_\_\_\_\_

Nature of Business \_\_\_\_\_ Years in Business \_\_\_\_\_

Purchase Order Required \_\_\_\_\_ Please send Invoices by Mail \_\_\_\_\_ Email \_\_\_\_\_

**PRINCIPALS NAMES & POSITIONS**

1) Name \_\_\_\_\_ Position \_\_\_\_\_

2) Name \_\_\_\_\_ Position \_\_\_\_\_

**TRADE REFERENCES (Attach or list below)**

1) Name \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

2) Name \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

3) Name \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

**TERMS OF SALE**

Payment is due 30 days from date of invoice. Interest on overdue accounts will be charged at the rate of 2% per month.

**CONSENT CLAUSE:**

I hereby authorize *Allworld Packaging Supplies Ltd.* to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement.

I have read the above terms of sale and consent clause and hereby agree to them.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_  
(Please Print)

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For office use only:

Date Approved \_\_\_\_\_ By \_\_\_\_\_

Customer # \_\_\_\_\_ Credit Limit \_\_\_\_\_

Introduced By \_\_\_\_\_

\*Please return via fax 604-254-4987 or e-mail: [sales@allworldpackaging.com](mailto:sales@allworldpackaging.com)