

280 – 3605 Gilmore Way
 Burnaby, BC V5G 4X5 Canada
 t. (604) 873-2797
 e. accounting@douglaslightingcontrols.com

Company Address	
Company Name	_____
Contact Name	_____
Address 1	_____
Address 2	_____
City	_____ State _____
Zip Code	_____ Tel. _____

Billing Address	
Company Name	_____
Contact Name	_____
Address 1	_____
Address 2	_____
City	_____ State _____
Zip Code	_____ Tel. _____

Company Information	Estimated Line of Credit required:	If affiliated with other companies, provide name and location:
DnB # _____	_____	_____
	IRS # _____	_____

Company Officers	
Name _____	Title _____
Name _____	Title _____
Name _____	Title _____

Accounts Payable Contact	
Name	_____
Tel.	_____
Email	_____

Bank Information	Contact
Bank _____	_____
Branch _____	Tel. _____

Trade Reference 1	Trade Reference 2	Trade Reference 3
Supplier _____	Supplier _____	Supplier _____
Contact _____	Contact _____	Contact _____
Address _____	Address _____	Address _____
City _____ State _____	City _____ State _____	City _____ State _____
Tel. _____	Tel. _____	Tel. _____
Email _____	Email _____	Email _____

<p>Terms of Sale</p> <p>Payment due in full 30 days from date of invoice. Interest on overdue accounts will be charged at the rate of 1.5% per month.</p> <p>Consent Clause</p> <p>I hereby authorize Douglas Lighting Controls, Inc. to obtain credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or any other direct business requirement.</p>	<p>I am signing officer of the company who has read the Terms of Sale and Consent Clause and am able to agree by these terms.</p> <p>Name (print) _____</p> <p>Title _____ Date _____</p> <p>Signature _____</p>
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Customer # _____
Company Name _____
Contact Name _____
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Address 2 _____
City _____ State _____
Zip Code _____ Tel. _____

RELEASE OF BANKING INFORMATION

Bank / Chequing: _____
Address: _____
Phone / Fax: _____ / _____ Contact: _____
Account Number (S): _____
Money Market / Savings: _____
Bank / Loan: _____
Address: _____
Phone: _____ Contact: _____
Account Number (S): _____
Secured With: _____

I am signed onto the above listed checking accounts and/or loan. I authorize release of all pertinent information to Douglas Lighting Controls.

Signature _____ Date _____