

## Thank you for your interest in opening an account with McKillican.

Attached is our complete Account Application Form. In order for us to proceed with your request as quickly as possible, we ask that you:

- Complete all sections of the Account Application
- Sign and date the Warranty/Guarantee sections
- Attach any applicable Resale Tax Exemption certificates
- Complete the General Customer Information (on this page)
- Fax the entire package directly to McKillican Credit Services at **780-455-1359**
- Make a copy of the entire package for your files.
- Mail the completed original package to:

*McKillican Credit Services  
16420 118 Avenue  
Edmonton, AB T5V 1C8*

- Applications that are entirely completed will be prioritized. Applications that are missing any requested information or are not completely signed will be delayed and/or returned.

### General Customer Information:

Have you been purchasing from McKillican on a Cash-sale basis?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, under what business/personal name? _____			
What McKillican products are you planning to purchase?			
	<b>Monthly Buys</b>	<b>Current Suppliers</b>	
Laminates/Decoratives	\$ _____	_____	
Hardware/Accessories	\$ _____	_____	
Wood/Panel Products	\$ _____	_____	
Which of the following added-services are you interested in receiving:			
<input type="checkbox"/>	Faxed Acknowledgements on every order?		
<input type="checkbox"/>	Priced Pick-Tickets shipped with every order?		
<input type="checkbox"/>	Purchase order required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<input type="checkbox"/>	Faxed Invoices (instead of mailed invoices)		
	Fax number: _____		
	Payables Contact: _____		
<input type="checkbox"/>	Regular field Sales Rep visits?		
<input type="checkbox"/>	Manufacturer Rep visits?		
	Which Mfg's? _____		
<input type="checkbox"/>	E-mailed special offers?		
	E-mail Contact: _____	Address: _____	

Additional copies of this Account Application may be downloaded at [www.mckillican.com](http://www.mckillican.com)  
Thank you for your interest in McKillican, your Complete Source.

**McKillican Corporate Office**

**Phone (780) 453-3841    Fax (780) 455-1359**

LEGAL BUSINESS NAME: \_\_\_\_\_

DBA: \_\_\_\_\_

Corporation     Partnership     Proprietorship     Other \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

SHIPPING ADDRESS : (If different): \_\_\_\_\_

CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ FAX: ( \_\_\_\_\_ ) \_\_\_\_\_

EMCIL ADDRESS: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

PROVINCE TAX #: \_\_\_\_\_ YEARS IN BUSINESS: \_\_\_\_\_

Authorized Purchases: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Purchase Order Required: Yes  No

Account Payable Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Premises:  Owned  Rented - If so, from whom: \_\_\_\_\_

Associated Companies and Subsidiaries: \_\_\_\_\_

**OWNERS AND/OR OFFICERS:**

	NAME & TITLE	ADDRESS	HOME PHONE	SOCIAL SECURITY#
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____

**TRADE REFERENCES:**

	NAME	PHONE	FAX
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

BANK: \_\_\_\_\_ Account Manager: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: City/Province: \_\_\_\_\_ City/Province: \_\_\_\_\_

Account #: \_\_\_\_\_

AMOUNT OF CREDIT REQUESTED: \$ \_\_\_\_\_ \*(Financial Statement Available):  Yes  No

*\*Financial statements are required for credit limits of 20,000.00 and over.*

Security Available if required: Yes  No  Please List: \_\_\_\_\_

**MCKILLICAN CANADIAN INC.** (hereafter referred to as MCI) has a desire to provide quality materials at reasonable, competitive costs; to provide courteous service; to stand behind our service and materials provided; to carry sufficient stock to meet customer's needs as expressed to MCI. To achieve that end, MCI has established the following credit terms and merchandise policy

**STATEMENT OF CREDIT POLICY**

1. Standard Terms of Sale are Net 15th of the month following the purchase and are subject to change.
2. A Service charge of 1-½% per month (18% per annum) will be assessed on the monthly statement on past due balances.
3. Delinquent accounts will be placed on C.O.D. and/or a Stop Shipment notice until the entire balance is paid in full. After that time, MCI retains the discretion to re-open the account.
4. A check returned to MCI, for any reason, will be assessed a service charge of \$25.00 and any established credit privileges may be revoked.
5. MCI is authorized to contact credit reporting agencies, and any trade or bank references, and is authorized to do a Personal credit check on any or all of the directors of the company in order to process this application (or to update the file) for credit to verify without liability, statements contained on the application.
6. The Company identified below and signed by and agreed to by an authorized representative, hereby grants to MCI a purchase money security interest in and to any goods, merchandise or products sold by MCI to the company and proceeds thereof to secure payment of any sums now due or to become due to MCI, together with all rights in collateral as are available under the Personal Property Security Act. The company waives right to receive a copy of any financing change statement.
7. The Company shall be liable for all collection expense including attorney fees, collection fees, court costs and applicable interest on past due account as allowed by law.

**RETURNS**

MCI will accept returns on all items that were purchased from stocking inventory in the past 90 days, and are in resalable condition. Returns are not accepted on non-stock or special ordered items. Returned goods must have prior MCI authorization and will be accepted only with an approved RGA (Return Goods Authorization). A Return Goods Authorization can be obtained from your local customer service representative. A restocking charge of 20% will be assessed on all returned merchandise that is re-saleable. All items are subject to inspection and items in non-saleable condition will not be accepted or credited.

**SHORTAGES/CLAIMS**

All claims for shortages or damages must be reported to us within five (5) days of receipt of merchandise and transit damage claims must be made directly with the delivering carrier. We will be pleased to furnish any information or assistance needed to establish your claim against the delivering carrier company. Damages and/or shortages must be noted on the delivery receipt and be countersigned by the delivering carrier's agent. Goods in transit are at the risk of the customer.

**WARRANTIES**

MCI does not manufacture, make, or design the products we sell. As such, MCI does not assume any liability for products sold, and makes no representation or warranty, either expressed or implied, on the suitability of the materials, or the accuracy of information provided. All implied warranties or suitability for a particular purpose are disclaimed and excluded from the terms of sale. Additionally, in no event shall MCI be liable for any direct, indirect, incidental or consequential damages, including without limitation, any damage to customer, property, and work in process, lost opportunity, or claims by third parties.

The Company applicants jointly and severally waive any right they may have to claim relief pursuant to the implied warranties under the *Sale of Goods Act*. The Company assumes all risk whatsoever as to the result of the use of the materials purchased, whether used singly or in combination of other substances. The Company's sole and only remedy shall be the repair or replacement of defective goods by the manufacturer in accordance with the manufacturer's stated warranty.

The Company by signature of an authorized agent(s) hereby acknowledges and agrees to the above.

\_\_\_\_\_

Date

\_\_\_\_\_

Company Name

\_\_\_\_\_

Authorized Signature

\_\_\_\_\_

Authorized Signature

\_\_\_\_\_

Print Name and Title

\_\_\_\_\_

Print Name and Title

**This application contains contractual terms for sales to your company. Please read carefully.**

**Return application to:**  
**McKillican Credit Services**  
**16420 118 Avenue**  
**Edmonton, AB T5V 1C8**  
**Fax: (780) 455-1359**  
**Note: Original application must be MCIled.**