



BOX 407 - Selkirk, MB - R1A 2B3
 TEL: (204) 785-8002
 TOLL FREE: 1-866-827-4765
 FAX: (204) 785-8006
 WEB: www.blastofffireworks.ca

ACCOUNT INFORMATION FORM

Operational Business Name: _____

Legal Business Name or National Account Number: _____

Account Contact (First & Last Name): _____

Alternate Contact (First & Last Name): _____

Mailing Address: _____ City: _____

Province: _____ Postal: _____

Store Telephone: _____ Fax: _____

Emergency Home Tel: _____ Emergency Cellular Tel: _____

E-mail Address: _____ Referred By (Store Name): _____

Secondary Payment Method (REQUIRED): VISA Mastercard

Card Number: _____ Expiry (MM/YY): _____

Shipping Address: _____

Specific Delivery Instructions: _____

Number of Years in Business: _____ Receiving Department Hours: _____

PST Exemption Number: _____

Accounts Payable Contact: _____ Telephone: _____

Primary Banking Information:

Financial Institution: _____ Branch Name: _____

Branch Contact: _____ Branch Telephone: _____

Branch Address: _____ Account Types: _____

Conditions of Sale:

- BLAST-OFF Fireworks is not responsible for stolen / damaged items.
- Terms of sale for each purchase are Net 30 days, unless otherwise stated or agreed.
- The customer agrees to pay carrying charges of 2% per month on any balance exceeding said terms.
- The account holder authorizes BLAST-OFF Fireworks to automatically charge delinquent account balances (over 60 days) to the primary credit card indicated above.
- Shipping Agreement: All *outbound* orders in excess of \$600 are shipped pre-paid.
- The customer agrees to pay all costs of collection or legal fees connected with this account, should such action be necessary due to non-payment.
- BLAST-OFF Fireworks retains title to delivered product until payment is received.
- Prices and availability of items subject to chance without notice. BLAST-OFF Fireworks reserves the right to provide substitute items.
- These Conditions of Sale govern every transaction conducted between BLAST-OFF Fireworks and the above mentioned client.

I consent to and accept this as written notice of BLAST-OFF Fireworks or its affiliates or service vendors (on its behalf) obtaining credit reports or other information about me and my business from any individual or business entity during the course of regular business operations.

Personal Guarantee: I understand that as the Primary Account Holder, I am personally responsible and liable for payment of all goods supplied by BLAST-OFF Fireworks.

Signature of Acceptance: _____ Date: _____

Name of Signatory: _____ Position in Organization: _____

PLEASE FAX COMPLETED FORM TO (204) 785-8006

Office Use:
 Nat: _____
 Dsc: _____
 Lmt: _____