



P.O. Box 1
 Drumheller, AB T0J 0Y0
 Fax 1-888-458-5373

PERSONAL INFORMATION BANK - FICHER DE RENSEIGNEMENTS PERSONNELS

FOR OFFICE USE ONLY
UTILISATION DE BUREAU SEULEMENT

**NEW / MODIFY
 CUSTOMER ACCOUNT**

**NOUVEAU / MODIFIEZ
 COMPTE DE CLIENT**

**NOTE: Completion and handling
 instructions on reverse.**

**NOTA: Instructions pour remplir et classer cette
 formule au verso.**

PUT AWAY ON FILE
 CLASSER AU DOSSIER

Application status Statut d'application APPROVED NOT AT THIS TIME

Credit limit
 Limit de dépense

Authorized signature
 Signature autorisée

Completing Operational Unit - Unité opérationnelle ayant rédigé le rapport

Current Province or Address - Adresse ou province

Is applicant a business?

NO Proceed to Section 1. YES Proceed to Section 2.

SECTION 1. - INDIVIDUAL / RESIDENTIAL APPLICATION

Surname - Nom de famille		First name - Prénom		Middle name(s) - Nom(s) de moyen	
Street address - Adresse de rue		City/Town - Ville		Province - État	Postal code
Mailing address - Adresse de courrier		City/Town - Ville		Province - État	Postal code
Home phone - Téléphone résidentiel	Mobile Phone - Téléphone cellulaire	Facsimile - Fax		Credit limit requested - Limit de dépense	
-	-	-		\$.	
Email address - Adresse du email					

SECTION 2. - BUSINESS / COMMERCIAL APPLICATION

Legal business name - Nom commercial legal		Doing business as - Nom opérationnel			
Street address - Adresse de rue		City/Town - Ville		Province - État	Postal code
Mailing address - Adresse de courrier		City/Town - Ville		Province - État	Postal code
Office phone - Téléphone de bureau	Alternate phone - Téléphone alternatif	Facsimile - Fax		Credit limit requested - Limit de dépense	
-	-	-		\$.	
Email address - Adresse du email					

GST Number - Nombre de TPS		GST Exempt? - Exemptez de TPS?		Legal structure - Structure légale	
RT		<input type="checkbox"/> NO Company pays GST	<input type="checkbox"/> YES, Company does not pay GST		

By signing, I hereby confirm that I, on behalf of myself or the company in which I represent, am requesting a credit account with the Kucher Services Corporation and understand that, if approved, I will have a credit account with the Kucher Services Corporation and all its divisions, subsidiaries and affiliated companies. Furthermore, I acknowledge that all credit accounts are subject to Net 30 Days terms and that a late payment fee of 2% per month, 26.82% per annum, will be imposed on all past due invoices. In default of payment, the Kucher Services Corporation reserves the right to share my personal information and/or my company's personal information with third parties for the purposes of collecting the amounts owing on my account. It is my responsibility and obligation to ensure that the Kucher Services Corporation is advised of any changes to my contact and business information as it pertains to my account.

I confirm that the above information is correct to the best of my knowledge. Providing false or misleading information may result in the forfeiture of all accounts and the cancellation of all credit privileges.

NAME - PRINT - NOM
Business title - Titre d'affaires (if applicable)

Signature _____

Date _____

YYYY-MM-DD

Use this form to apply for a new account with the Kucher Services Corporation and to change existing accounts. Having an account with the Kucher Services Corporation automatically enrolls you for charging privileges at all its divisions, subsidiaries and affiliated companies.

Section 1. - Individual / Residential Application

Complete this section for accounts not being registered under a company name.

Home phone / Mobile phone / Facsimile - Enter the numbers one digit per space.

Credit limit requested - Enter the dollars before the decimal, cents after.

Section 2. - Business / Commercial Application

Complete this section for accounts being registered under a company name.

Office phone / Alternate phone / Facsimile - Enter the numbers one digit per space.

Credit limit requested - Enter the dollars before the decimal, cents after.

GST Number: Enter your GST number for accounting and tax reporting purposes. This number is issued by the Canada Revenue Agency (www.cra-arc.gc.ca).

Legal structure - Identify the legal structure of your business (e.g., Sole Proprietor, Partnership or Corporation). If Sole Proprietor, your full name is the legal name of the company; the registered trade-name, if applicable, is entered in the 'Doing business as' field.