

CREDIT APPLICATION

BUSINESS INFORMATION

Full Legal Name _____

Trade Name _____

Billing Address _____

City _____ Province _____ Postal Code _____

Telephone Number _____ Fax Number _____ Cell Number _____

Email Address _____ Accounts Payable Contact _____

Form of Business Proprietorship Partnership Corporation

Nature of Business _____ Years in Business _____ Number of Employees _____

Names of Officers 1) _____ Title _____

2) _____ Title _____

BANK INFORMATION

Name of Bank _____ Contact _____

Address _____ Province _____ Postal Code _____

Account Number _____ Phone Number _____ Fax Number _____

TRADE REFERENCES (Three [3] references are required to open an account)

Company Name _____ Account Number _____

Phone Number _____ Fax Number _____

Company Name _____ Account Number _____

Phone Number _____ Fax Number _____

Company Name _____ Account Number _____

Phone Number _____ Fax Number _____

Please supply the following information to help us serve your account needs

1. Do you require a purchase order number on each invoice? If yes, product will not be released unless provided. YES NO

2. Do you have any restrictions on who can order or sign for product. If yes, a list of authorized personnel must accompany this application. YES NO

OPEN ACCOUNT TERMS AND CONDITIONS

I understand that Rips Shoe Re-Nu Ltd., terms are Net 30 Days from the date of the invoice unless otherwise specified. My account may be subject to finance charges on past due balances of 2% per month (24% per annum compounded monthly). Furthermore, I understand that my orders will not be shipped if my account is past due and that a collection fee (including legal fees) and related costs are my responsibility in the event of non-payment. Until the vendor is in receipt of all payment due and owing pursuant to this agreement, title and ownership of the goods as well as any proceeds from the sale of such goods shall be and remain in the vendor's name. The purchaser waives any and all rights, protection of benefit it may have pursuant to any applicable conditional sales laws. I make this application on behalf of the above mentioned company and all information continued herein is represented to be true and correct. I consent to and authorize my bank to release credit and chequing account information to Rips Shoe Re-Nu Ltd. I have also read and understand the Terms and Conditions of Sale attached and hereby agree to them as part of my dealings with Rips Shoe Re-Nu Ltd.

Your attention to the following will be appreciated:

- 1) At the discretion of Rips Shoe Re-Nu Ltd., any account with a delinquent balance may be placed on a cash basis at any time.
- 2) Interest at 2% per month (24% per annum compounded monthly) may be charged on all past due amounts.
- 3) Your account number will appear on all invoices and statements. Please refer to your account by number when submitting payments or when corresponding with us.
- 4) When statements are issued, they will include individual transactions up to and including the statement date. Should you ever disagree with an item appearing on your statement, please let us know so that it may be investigated.
- 5) Your prompt notification of any change in business name, address or ownership will facilitate accurate billing.
- 6) Facsimile copies will be accepted as originals.

Authorized Signature _____ Title _____

Name (please print) _____ Date _____