



# Great Lakes Food Company

135 Bothwell Street, PO Box 426

Chatham, ON N7M 5K5

TEL: 519-354-4600

FAX: 519-354-9566

**GREAT LAKES FOOD**

## Credit Application

Company Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address : \_\_\_\_\_ Fax # \_\_\_\_\_

City: \_\_\_\_\_ State/Prov : \_\_\_\_\_

Postal/Zip : \_\_\_\_\_

Fed Tax ID: (US only) \_\_\_\_\_ DUNS Number \_\_\_\_\_

Purchasing Contact Name : \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail address : \_\_\_\_\_ Fax # \_\_\_\_\_

### BILLING INFORMATION IF DIFFERENT FROM ABOVE (Where Invoices should be mailed)

Bill to Address : \_\_\_\_\_

City: \_\_\_\_\_ State/Prov : \_\_\_\_\_

Postal/Zip : \_\_\_\_\_

A/P Contact Name : \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail address : \_\_\_\_\_ Fax # \_\_\_\_\_

### SHIP TO INFORMATION

Ship to Address (1) : \_\_\_\_\_

City : \_\_\_\_\_ State/Prov : \_\_\_\_\_

Postal/Zip : \_\_\_\_\_

Receiving Hours : \_\_\_\_\_

Appointment needed :  Y  N

Shipping Contact Name : \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail address : \_\_\_\_\_ Fax # \_\_\_\_\_

Ship to Address (2) : \_\_\_\_\_

City : \_\_\_\_\_ State/Prov : \_\_\_\_\_

Postal/Zip : \_\_\_\_\_

Receiving Hours : \_\_\_\_\_

Appointment needed :  Y  N

Shipping Contact Name : \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail address : \_\_\_\_\_ Fax # \_\_\_\_\_

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## Credit Application (Continued)

### BANKING INFORMATION

Bank Name : \_\_\_\_\_ Acct # \_\_\_\_\_

City : \_\_\_\_\_ State/Prov : \_\_\_\_\_ Postal/Zip : \_\_\_\_\_

Bank Contact Name : \_\_\_\_\_ Tel # \_\_\_\_\_

E-mail address : \_\_\_\_\_ Fax # \_\_\_\_\_

### TRADE REFERENCES

Vendor Name (1) : \_\_\_\_\_ Tel # \_\_\_\_\_

City : \_\_\_\_\_ State/Prov : \_\_\_\_\_ Fax # \_\_\_\_\_

Contact : \_\_\_\_\_ E-mail address : \_\_\_\_\_

Vendor Name (2) : \_\_\_\_\_ Tel # \_\_\_\_\_

City : \_\_\_\_\_ State/Prov : \_\_\_\_\_ Fax # \_\_\_\_\_

Contact : \_\_\_\_\_ E-mail address : \_\_\_\_\_

Vendor Name (3) : \_\_\_\_\_ Tel # \_\_\_\_\_

City : \_\_\_\_\_ State/Prov : \_\_\_\_\_ Fax # \_\_\_\_\_

Contact : \_\_\_\_\_ E-mail address : \_\_\_\_\_

### CREDIT POLICY

*Payment terms are 30 days from date of invoice. All delinquent accounts that remain unpaid beyond 15 days past due date will be placed on "Credit Hold". While an account is on Credit Hold no orders will be shipped until past due invoices are remedied. Accounts over 30 days past due will be placed on COD. If an account is consistently over 30 days past due &/or on Credit Hold, it will be placed on COD permanently.*

\_\_\_\_\_  
**Signature of Corporate Officer/Owner/Partner** **Printed Name**

Date : \_\_\_\_\_ Title : \_\_\_\_\_

**Please Complete and Return by Email to [sales@greatlakesfood.ca](mailto:sales@greatlakesfood.ca) or Fax back to 519-254-6599**