

CUSTOMER ACCOUNT APPLICATION

SELLER: _____

Last name:		First name:	
Address:			
City:		Postal code:	
Email:			
Home phone:		Cell phone:	
Social insurance #:		Date of birth:	
Employer:		Title:	
Since:		Annual revenue:	
Financial institution: <small>(If Desjardins, please include the name of the Caisse. Ex.: Caisse Desjardins Salaberry-de-Valleyfield)</small>		Account #:	
Address:		City:	Phone:
Owner:		Renter:	
Spouse Last name:		First name:	
Address:			
City:		Postal code:	
Social insurance #:		Date of birth:	
Employer:		Title:	
Since:		Annual revenue:	
Delivery address:		City:	
Approximative cost of the work:		Renovation:	
Credit amount requested:		New construction:	

With the present document, I authorize the financial institutions to provide information on my account. I agree to comply with the payment terms and conditions of Matériaux Miron Inc., which are as follows: all purchases must be paid in full on the 10th day of the month following the reception of the merchandise, in cash, by check or BMR credit card. Payments by conventional credit cards are not allowed for the statements of accounts. For all payments made through Centria Commerce System, all fees will be charged to the client.

All outstanding amounts due past the above-mentioned terms are subject to interest fees of 24% per year.

Name:	Signature:	day	month	year
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Section for the credit department only:	Type #
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