

Credit Application -

Please Fax Copy of Tax Exempt Certificate

6869 Ash Street
Vancouver, V6P3K5

Phone: 778-829-5898
Fax: 604-327-1800
E-mail: info@measuretek.net

Customer Information

Company Name: _____

Address: _____

City, State, Zip: _____

Telephone and Fax: _____

E-mail: _____

Contact: _____

Requested Credit Limit: _____

Bank Information

Bank Name: _____

Address: _____

City, State, Zip: _____

Telephone and Fax: _____

Trade References

Company Name: _____

Address: _____

City, State, Zip: _____

Telephone and Fax: _____

Trade References

Company Name: _____

Address: _____

City, State, Zip: _____

Telephone and Fax: _____

Customer Maintenance

6869 Ash Street
Vancouver, V6P3K5

Phone: 778-829-5898
Fax: 604-327-1800
E-mail: info@measuretek.net

Bill- to Information

Company Name: _____

Address: _____

City, State, Zip: _____

Telephone and Fax: _____

E-mail: _____

Contact: _____

Ship-to Information (Leave Blank if same as bill to)

Company Name: _____

Address: _____

City, State, Zip: _____

Telephone and Fax: _____

E-mail: _____

Contact: _____

Shipping Preferences

UPS (YES/NO): _____ USE MY UPS ACCOUNT (YES/NO) _____

UPS ACCOUNT # _____