



# ROMCO

Division Boudreault Canada Ltd./Ltée

1730 rue Bantree Road, Ottawa, Ontario, K1B 3W4

Fax: 613.746.8642 | Email/ Courriel: sales@romco.ca

## ACCOUNT REQUEST

CUSTOMER NUMBER

Please fill in this form and return it by post at the address shown above or by fax

Full name of your contact or your representative from Romco (if applicable):

### Company Information

Business legal name : Incorporated  Limited  Registered

Years in operation: Number of Employees : Provincial Tax Number:

Address : City, Province, Postal Code :

Phone : Fax : Contact Name:

Owner's Name : City :

Address : Province, Postal Code :

Phone : Fax :

### Accounts Payable

Contact Name: Title :

Phone : Fax : E-mail :

Send Statement of Account by: Email  Fax  No Statement

### Purchasing

Contact Name : Title :

Phone : Fax : E-mail :

**NEW** I would like to receive the promotions by e-mail

### Shipping address

(If not the same as company address)

Contact Name :

Shipping Address : City/ Province :

Phone : Fax : Postal Code :

### Multiple shipping address

(If more than 2 shipping address, please attach a list with all needed information)

Contact Name :

Shipping Address : City/ Province :

Phone : Fax : Postal Code :

### Bank Information

Bank Name: Contact Name :

Account Number : Transit :

Address : City:

Phone : Fax: Province:

Amount of credit required (\$) : Postal Code:

### Credit reference

Name : Address : Phone :

Name : Address : Phone :

Name : Address : Phone :

### Authorized Signature

I hereby authorized Romco to verify my credit information.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_ Position \_\_\_\_\_