

Affûtage

LEROUX

Please return by
Fax:613-749-5551

Sharpening

NEW CUSTOMER ACCOUNT

GST/TPS.R112566641

INFORMATIONS

Firm NAME: _____

Firm ADDRESS: _____

City: _____ Postal Code: _____

PHONE: _____ FAX: _____

Type Of Business: _____

GST # _____

NAMES OF OWNERS, PARTNERS or OFFICERS.

Name	Title	Phone + #

TRADE REFERENCES

Name	Phone:()	Fax:()
Address:	City:	Postal code:
Name	Phone:()	Fax:()
Address:	City:	Postal code:
Name	Phone:()	Fax:()
Address:	City:	Area code

BANK INFORMATION

Bank:	Phone:
Branch:	Acct#
Bank:	Phone:
Branch:	Acct#

Authorization:

Credit Limit: \$ _____

Date: _____ Signature: _____ Title: _____

1551 Michael Street , Unit B1, Ottawa, Ontario, K1B 3T4 | Phone & Fax: 613-749-5551.

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