

## **Account Setup Information**

330 Transport Road, Winnipeg, MB R5R 0J5 Tel: (204) 668-8360 Fax: (204) 667-1775 sales@HJSWHolesale.com

CUSTOMER INFORMATION			
		Type of Business	
		Individual/Sole Proprietor	Corporation
		Partnership	Limited Partnership
Trade or Business Name (if different than above)		Joint Venture	Other
		Organized or formed in the Provin	ice of
Mailing Address		Physical Address – If Mailing Address is PO Box	
City	Province	Postal Code	Work Phone #
Mobile Phone #	Fax#	Years in Business	Purchase Order Request Yes
			No .
Email		PST Registration #	GST Registration #
List person(s) authorized to order		Email	
List person(s) authorized to order		Email	
List person(s) authorized to order		Email	
Accounts Payable Contact		Email	
Greenhouse – Wholesale Landscaper	Greenhouse – Retail Hydroponic	Tree Nursery Colony	Other
*(Optional) Sign and complete only for payment processing			
		Vice	Mastereard American Everson
Authorization to charge credit card for purchases		Visa !	Mastercard American Express
Cardholder Name			
Card Number		Expiration Date	Security Code
B: (N		0: 1	
Print Name		Signature	
Print Name		Signature	
Signed on this	day of	Year	
Customer Responsibility Acknowledgment By checking this box, you acknowledge that any additional delivery services requested beyond an agreed-upon quote are your responsibility and will incur extra charges. You understand that these additional costs will be invoiced directly to you by the shippers or HJS, and you agree to settle these invoices promptly. This acknowledgment confirms that you have read and understood this disclosure and accept full responsibility for any supplementary charges associated with your delivery needs.			