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Toll Free: 888.858.4422 **Fax: 877.323.9093**
info@pdgmobility.com www.pdgmobility.com

Credit Application Required

Attn: _____

Thank you for your enquiry to purchase PDG products. All new dealers are required to supply PDG with a Completed Credit Application (attached).

Once you have completed your Credit Application form, please fax it to PDG @ **1-877-323-9093**.

Please include names, phone numbers and e-mail addresses of all key contacts so we can provide ongoing support.

This documentation must be received and approved by PDG accounting prior to shipping any PDG products.

All of us at PDG greatly appreciate your business and look forward to working with you.

Regards,

Sandy Chan

PDG Accounting Manager

PDG Product Design Group Inc CREDIT APPLICATION

Thank you for your interest in PDG products. The following information must be provided to PDG Credit Department prior to our shipping your first order. Please complete the form and fax it to PDG at 1-877-323-9093

Company Name: _____

Billing Address: _____

Shipping Address: _____

Phone: _____ Fax: _____

Buying Group Member: _____

Years in Business: _____ Corporation ___ Proprietorship ___ Partnership ___

Principal Financial Contact: _____

Phone: _____ e-mail: _____

Estimate amount of monthly credit required: _____

Bank Reference: _____

Address: _____

Phone: _____ Contact Person: _____

Trade References:

Business Name: _____

Address: _____

Contact Person: _____ Phone: _____ Fax: _____

Business Name: _____

Address: _____

Contact Person: _____ Phone: _____ Fax: _____

Key Contacts needed for business development;

Contact Names	Phone	e-mail
<i>Rehab Sales Manager</i>		
<i>Sales Reps</i>		
<i>Purchasing Manager</i>		

We hereby authorize you to obtain information concerning our credit from the above references. We undertake to pay invoices according to terms included in our Dealer Contract and understand that failure to do so will mean withdrawal of credit privileges.

Signing Officer: Name: _____ Signature: _____

Date: _____

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(Office Use Only)

Is this dealer part of a Group? _____

Credit Limit: _____ *Approved By:* _____

Account #: _____ *Date:* _____