

**MACK
MANITOBA LTD.**



MACK SALES & SERVICE OF MANITOBA LTD.

385 EAGLE DR., GRP 200 BOX 99 RR#2 WINNIPEG, MANITOBA R3C 2E6
 TELEPHONE (204) 772-0316 FAX: (204) 783-9666
 MANITOBA, ONTARIO (807) AREA) & SASKATCHEWAN 1-800-561-1318

NAME IN FULL (TRADE NAME)		INDIVIDUAL <input type="checkbox"/>	PARTNERSHIP <input type="checkbox"/>	CORPORATION <input type="checkbox"/>
BUSINESS ADDRESS	NUMBER AND STREET	BUSINESS PHONE NO		
	CITY	POSTAL CODE	PROVINCE	
RESIDENCE ADDRESS	NUMBER AND STREET	RESIDENCE PHONE NO		
	CITY	POSTAL CODE	PROVINCE	
TYPE OF BUSINESS				
NUMBER OF MACK TRUCKS OWNED AND OPERATED		NUMBER OF OTHER TRUCKS OWNED AND OPERATED		
DRIVERS LICENCE NUMBER		BIRTHDATE		
PROVINCIAL SALES	<input type="checkbox"/>	<input type="checkbox"/> ATTACH BLANKET CERTIFICATE IF APPLICABLE		
TAX EXEMPT	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
LIST OTHER MACK FACTORY BRANCHES AT WHICH CREDIT IS DESIRED				
BANK REFERENCES (CHEQUE ACCOUNT)	ADDRESS	FAX #		
BANK REFERENCES (LOANS)	ADDRESS	FAX #		
TRADE REFERENCES	ADDRESS	FAX #		
TRADE REFERENCES	ADDRESS	FAX #		
TRADE REFERENCES	ADDRESS	FAX #		

ACCOUNT MAXIMUM _____ SINGLE PURCHASE MAXIMUM _____
 CUSTOMER ACCOUNT NUMBER _____ PARTS DISCOUNT CODE _____

ONE STATEMENT WILL BE MAILED TO THE BUSINESS ADDRESS SHOWN ABOVE EACH MONTH. THE STATEMENT WILL INCLUDE CHARGES FOR PARTS AND SERVICE WORK PURCHASED FROM ALL MACK CANADA INC. BRANCHES AND DISTRIBUTORS. ACCOUNTS ARE PAYABLE UPON RECEIPT OF STATEMENT.

I (WE) HEREBY MAKE APPLICATION FOR ACCOUNT PRIVILDGES MY MY (OUR) NORMAL MONTHLY PURCHASES AT MACK PARTS AND/OR SERVICE DEPARTMENTS WITH THE UNDERSTANDING THAT ALL CHARGES FOR PARTS AND SERVICE WORK ARE TO BE PAID PROMPTLY ON RECEIPT OF STATEMENT AND IF NOT PAID BY THE 30TH OF THE MONTH SUCCEEDING DATE OF INVOICE, ACCOUNT PRIVILEGES MAY BE WITHDRAWN, AND INTEREST CHARGED ON THE PAST DUE BALANCE AT THE RATE OF _____ PER MONTH.

IN CONNECTION WITH MY APPLICATION FOR CREDIT I HEREBY CONSENT THAT MACK SALES & SERVICE OF MANITOBA CONDUCT AND/OR CAUSE TO BE CONDUCTED A PERSONAL INVESTIGATION.

PER _____

SIGNATURE

TITLE