

UBC COOL CANADA Inc.

1143 HAULTAIN COURT MISSISSAUGA, ON L4W 2K1

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WHOLESALER APPLICATION FORM

*Please complete and return via fax or email at your earliest convenience

GENERAL BUSINESS INFORMATION				
Company Name:		DBA:		
Address:		City:		
Province:		Postal Code:		
Telephone:		Email:		
Fax:		HST/ GST Number:		
PST Number (British Columbia & Quebec):				
PST Exemption Number (Manitoba):				
Corporation, Partnership or Sole Owner (choose which app			olies):	
Name of Owner or Major Shareholder:				
Name of accounts payable:				
Are comp	pany purchase orders required? (Yes / No):			
Years in Business				
Years in Business:		Telephone:		
Type of Business:		Email:		
Shin to A	ddress (if different from above):			
City:				
Postal Code:				
Province:				
Tailgate Required? (if you do not have a truck-level dock):				
	cial / Residential:			
Commorcial / Residential.				
AUTHORIZED SIGNATURE				
I TESTIFY THAT I HAVE THE AUTHORITY TO PURCHASE ON MY COMPANYS BEHALF AND AGREE TO PAY ALL INVOICES FROM UBC GROUP CANADA.				
Name of Authorized Purchaser(s):				
Authorized Signature:		Date:		
Print Name(s):		Title:		