



**DIRECTOR DETAILS (CONTINUED)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City Province Postal Code

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Street City Province Postal Code

**BUSINESS REFERENCES (Minimum of Three)**

1. \_\_\_\_\_  
Name Telephone/Fax Monthly Purchases/Trading Terms  
Checked By \_\_\_\_\_
2. \_\_\_\_\_  
Name Telephone/Fax Monthly Purchases/Trading Terms  
Checked By \_\_\_\_\_
3. \_\_\_\_\_  
Name Telephone/Fax Monthly Purchases/Trading Terms  
Checked By \_\_\_\_\_

Shipping Agreement \_\_\_\_\_  
Terms of Trading 30 days from Invoice date. Other \_\_\_\_\_

I/We agree to be bound by the BLACK DIAMOND DRILLING TOOLS CANADA INC. STANDARD CONDITIONS OF SALE printed overleaf which may be varied from time-to-time by BLACK DIAMOND.

Director's Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Director's Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Director's Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Date \_\_\_\_\_

Requested Monthly Credit Limit \_\_\_\_\_

<b>BLACK DIAMOND DRILLING TOOLS CANADA INC. use only:</b>		
Representative's Signature _____	Recommended Credit Limit _____	
Terms of Trading _____		
Comments _____		
Credit Limit _____	Account Code _____	Rep _____
Approved By _____		Date _____
HEAD OFFICE		
Account Opened By _____		Date _____