



## Form 1: C.O.D ACCOUNT APPLICATION

THIS FORM IS FOR CUSTOMERS WHO **DO NOT** WANT PAYMENT TERMS OR CREDIT FROM C & S AUTO PARTS LIMITED o/a COLLINS AUTO PARTS (hereinafter referred to as "Collins")

### BUSINESS INFORMATION

NAME OF APPLICANT / "CUSTOMER":		HST#:
TRADE NAME (if different from above):		
ADDRESS:		
CITY:	PROVINCE:	POSTAL CODE:
PHONE:	EMAIL:	FAX:
INVOICE MAILING ADDRESS (If different from above):		
CITY:	PROVINCE:	POSTAL CODE:
CUSTOMER CONTACT NAME:		PHONE:
TYPE OF BUSINESS: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____		
Does the company have any branch locations that accept deliveries? <input type="checkbox"/> No <input type="checkbox"/> Yes		
If <b>yes</b> , please list branch names and addresses:		
What will be your method of payment? <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <i>(Fill out Credit Card Authorization Form)</i>		

### OWNERSHIP INFORMATION

OWNER/DIRECTOR/PARTNER/SHAREHOLDER NAME(S):			
OWNER ADDRESS (RESIDENCE):			
CITY:	PROVINCE:	POSTAL CODE:	PHONE:
The Applicant hereby certifies that all the statements made in this Application are true. The Applicant acknowledges and agrees that Collins Standard Terms and Conditions (which may be amended from time to time by Collins) and Returns Policy apply on all purchases of goods and services under the trading account and that by signing and returning this Application to Collins, the Applicant agrees to be bound by such terms and conditions, as may be amended from time to time. Current versions of the terms and conditions can be found at <a href="http://www.collinsautoparts.com">www.collinsautoparts.com</a> .			
CUSTOMER NAME:			
AUTHORIZED SIGNATURE:			DATE:
NAME (Please Print):		TITLE:	
WITNESS SIGNATURE:		WITNESS NAME:	

151 Nugget Avenue, Scarborough, Ontario M1S 3B1  
 Office: 416-754-8540 / Toll free: 1-800-834-6561  
 Parts: 416-754-8500 / Fax: 416-754-7128  
**Machine Shop: 416-754-8510**

16 Centre Street North, Oshawa, Ontario L1G 4B3  
 Office: 905-723-2261  
 Fax: 905-723-3873



**Form 2: CREDIT ACCOUNT APPLICATION**

THIS FORM IS FOR CUSTOMERS WHO WANT PAYMENT TERMS OR CREDIT FROM C & S AUTO PARTS LIMITED o/a COLLINS AUTO PARTS (hereinafter referred to as "Collins")

**BUSINESS INFORMATION**

NAME OF APPLICANT / "CUSTOMER":		HST#:	
TRADE NAME (if different from above):			
ADDRESS:			
CITY:	PROVINCE:	POSTAL CODE:	
PHONE:	FAX:	EMAIL:	
INVOICE MAILING ADDRESS (If different from above):			
CITY:	PROVINCE:	POSTAL CODE:	
CUSTOMER CONTACT NAME:			TEL:
How long have you been at your current address?			
TYPE OF BUSINESS: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____			CORPORATION NUMBER:
GROSS SALES ANNUALLY: \$ _____ , _____ , _____ . 00			
LENGTH OF TIME IN BUSINESS: <input type="checkbox"/> Less than 1 year* <input type="checkbox"/> 1 to 3 years <input type="checkbox"/> 3 to 5 years <input type="checkbox"/> Over 5 years			
* A personal guarantee is required for all Customers in business for less than one year. Please fill out the Guarantee form on page three (3) at the time of application. Collins may, at its sole discretion, require any Customer to provide a personal guarantee at any time.			
Has the company operated under <b>any other name in the past 5 years?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes			
If <b>yes</b> , please name:			
Does the company have any <b>branch locations?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes			
If <b>yes</b> , please list branch names and addresses:			
Customer Employees Authorized to Purchase from Collins:			

**OWNERSHIP INFORMATION**

DIRECTOR/OWNER/PARTNER/SHAREHOLDER NAME:			
ADDRESS (RESIDENCE):			
CITY:	PROVINCE:	POSTAL CODE:	PHONE:

**CREDIT LIMIT AND METHOD OF PAYMENT**

Method of payment? <input type="checkbox"/> Cheque <input type="checkbox"/> Online <input type="checkbox"/> Credit Card <i>(Fill out Credit Card Authorization Form)</i>
What credit limit amount are you requesting?    \$ _____ ** <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly

**\*\* Please note that if you request a line of credit over \$1,000.00 monthly, Collins will obtain a credit report to assess your business' creditworthiness. Please also note that the Customer is not guaranteed the credit limit requested on this application.**



**BANK INFORMATION**

BANK NAME:		CONTACT NAME:	
BANK ADDRESS:		ACCOUNT #:	
CITY:	PROVINCE	POSTAL CODE:	PHONE:

**SUPPLIER / TRADE REFERENCES**

Please provide **three** supplier companies with whom your business has established credit previously.

1   COMPANY NAME:		EMAIL:	
CONTACT NAME:	PHONE:	FAX:	

What date did you open your account with this supplier? \_\_\_\_ month / \_\_\_\_ day / \_\_\_\_ year

Recent high credit? \$ \_\_\_\_\_

Annual business with this supplier?  Under \$50,000  \$50,000 - \$200,000  \$200,000 - \$500,000  Over \$500,000

2   COMPANY NAME:		EMAIL:	
CONTACT NAME:	PHONE:	FAX:	

What date did you open your account with this supplier? \_\_\_\_ month / \_\_\_\_ day / \_\_\_\_ year

Recent high credit? \$ \_\_\_\_\_

Annual business with this supplier?  Under \$50,000  \$50,000 - \$200,000  \$200,000 - \$500,000  Over \$500,000

3   COMPANY NAME:		EMAIL:	
CONTACT NAME:	PHONE:	FAX:	

What date did you open your account with this supplier? \_\_\_\_ month / \_\_\_\_ day / \_\_\_\_ year

Recent high credit? \$ \_\_\_\_\_

Annual business with this supplier?  Under \$50,000  \$50,000 - \$200,000  \$200,000 - \$500,000  Over \$500,000

The Applicant certifies that all statements made in this application including any attachments are true and complete and are made for the purpose of obtaining an account with Collins Auto Parts and for the purpose of securing credit with Collins. The Applicant authorizes Collins to make all enquiries it deems necessary to investigate the Applicant's financial status including obtaining and receiving information from the Applicant's bank, credit references and Third Party Agencies. The Applicant consents to the collection, use and disclosure of the Applicant's personal information by Collins as discussed herein and for the purposes set forth herein. The Applicant acknowledges and agrees that Collins Standard Terms and Conditions (which may be amended from time to time by Collins) and Returns Policy apply on all purchases of goods and services under the trading account and that by signing and returning this Application to Collins, the Applicant agrees to be bound by such terms and conditions, as may be amended from time to time. Current versions of the terms and conditions can be obtained at [www.collinsautoparts.com](http://www.collinsautoparts.com). Collins, at its sole discretion, reserves the right at any time to require any applicant to provide a personal guarantee prior to extending credit.

CUSTOMER NAME:

AUTHORIZED SIGNATURE:	DATE:
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NAME (Please Print):	TITLE:
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WITNESS SIGNATURE:	WITNESS NAME:
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**FOR OFFICE USE ONLY:**

Application Approved Name (Please Print):	Credit Limit:
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Signature:	Date:
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**Guarantee**

In consideration of Collins (as defined on page one of the Credit Application) extending financing/credit and supplying goods and services ('Goods') from time to time to the Customer (as defined on page one of the Credit Application) the undersigned and each of them, if more than one, hereby jointly and severally unconditionally guarantees the due payment of all monies which are now or which shall at any time hereafter be due or remaining unpaid including all interest, legal and other costs, charges and expenses to Collins by the Customer.

The Guarantor and each of them, if more than one, hereby jointly and severally agrees with Collins that:

- ✓ This shall be a continuing and irrevocable guarantee and shall cover all present and future liabilities of the Customer to Collins.
- ✓ Collins shall have the right at any time to refuse further credit financing to the Customer, and to extend the time for payment by the Customer without notice to the Guarantor and without discharging or affecting the Guarantor's liability. Collins shall have the sole and unfettered discretion to grant renewals, extensions, indulgences, and may vary, amend, release or discharge any security held by Collins, and may apply all payments received from the Customer or realized upon the security had from the Customer, in such manner as Collins may determine. Collins shall not be bound to exhaust its recourses or remedies against the Customer or other persons or the securities Collins may hold before being entitled to payment from the Guarantor.
- ✓ Collins shall have no obligation to account to the Guarantor respecting the security and recovery or realization taken thereon. This guarantee shall remain valid notwithstanding any defect, default or neglect by Collins in realizing against any security and the Guarantor shall remain liable as Guarantor irrespective of any claims or deficiencies as may exist or arise between the Customer and Collins.
- ✓ The Guarantor agrees that as between the Guarantor and Collins, the Guarantor shall be liable as principal debtor until Collins shall have received payment of all sums owing to it. This guarantee and the Guarantor's obligations hereunder shall continue notwithstanding the bankruptcy, insolvency, receivership, winding up or cessation of business of the Customer and Collins shall not be required to prove against the assets or estate of the Customer before requiring payment from the Guarantor under this guarantee. This guarantee shall be valid notwithstanding any change or changes in the name of the Customer, or in the membership of the Customer's firm by death, retirement or introduction of other partners. Any change shall not limit or lessen the liability of the Guarantor and this Guarantee shall extend to any person, firm or corporation acquiring or carrying on the business of the Customer.
- ✓ This guarantee is in addition to and not in substitution for any other guarantee by whomsoever given. All debts and liabilities, present and future of the Customer to the Guarantor are hereby assigned to Collins and postponed to the present and future debts and liabilities of the Customer to Collins.
- ✓ This guarantee shall be binding on the Guarantor's heirs, executors, legal representatives, successors and assigns and shall extend and enure to the benefit of Collins's successors and assigns.
- ✓ This guarantee shall be construed according to the laws of the Province of Ontario.
- ✓ The determination, discharge or release of one guarantor may be made by Collins in its discretion without notice to the other guarantor(s) and shall not operate to release or discharge the Guarantor under this guarantee.

I consent to the collection by Collins of personal and credit information concerning me from third parties or otherwise, to the conducting of personal credit investigation(s) about me and to the release by third parties to Collins, of such information as Collins may request at any time in connection with this Guarantee and for so doing this shall be full and sufficient authority.

1 | GUARANTOR NAME:

ADDRESS:

CITY:	PROVINCE:	POSTAL CODE:
PHONE:	FAX:	EMAIL:

S.I.N.:

SIGNATURE OF GUARANTOR:	DATE:
SIGNATURE OF WITNESS:	WITNESS NAME:

2 | GUARANTOR NAME:

ADDRESS:

CITY:	PROVINCE:	POSTAL CODE:
PHONE:	FAX:	EMAIL:

S.I.N.:

SIGNATURE OF GUARANTOR:	DATE:
SIGNATURE OF WITNESS:	WITNESS NAME:



## Form 3: Credit Card Authorization

### CREDIT CARDHOLDER INFORMATION

CUSTOMER NAME:		
NAME ON CREDIT CARD:		
TYPE OF CREDIT CARD: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
CREDIT CARD NUMBER:		
EXPIRY DATE:		
SECURITY CODE:	<i>Note: For Visa and MasterCard, the Security Code is the <b>3 digit number</b> on the back of the card. For American Express, the Security Code is the <b>4 Digit number</b> on the front of the credit card.</i>	
BILLING ADDRESS:		
CITY:	PROVINCE:	POSTAL CODE:
PHONE:		

### AUTHORIZATION OF CREDIT CARD USE

I/We hereby authorize C & S Auto Parts Limited o/a Collins Auto Parts (hereinafter referred to as "Collins"), with its head office located at 151 Nugget Avenue, Scarborough, ON, M1S 3B1, to charge this credit card for all current and/or future Customer orders for goods from Collins. All amounts charged will be in Canadian funds.

I/We will ensure that funds are available for every Customer order and understand that a declined payment may result in one or all of the following: (a) a second presentation or attempt to process payment, (b) cancellation of this credit card payment agreement, (c) cancellation of the Customer account.

I/We understand that this authorization may be cancelled by me/us upon written notice.

I/We warrant and guarantee that the person whose signature is required to sign on this card has signed this authorization below.

I/We understand that this authorization is continuous and will automatically apply to all future Customer orders until such time as Collins has received written notification from me/us of its change or termination.

Collins may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 (ten) days prior written notice to me/us.

I/We authorize Collins to collect or use my/our personal information for the purpose of this authorization for payments of my/our Customer orders and purchases.

I/We authorize Collins to disclose any personal information contained in this authorization form to its financial institution to the extent disclosure is directly related to, and necessary for, the proper execution of the transaction(s) for the Customer orders.

CARDHOLDER NAME (PLEASE PRINT):	
AUTHORIZED CARDHOLDER SIGNATURE:	DATE:
CARDHOLDER DRIVER'S LICENCE PROVINCE AND NUMBER:	

\* Please include a photocopy of the front and back of your credit card with this authorization. Thank you.

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## Form 4: Loyalty Program Membership

Are you or is your business a member of any loyalty programs?     No     Yes

If **yes**, which ones:

**AC Delco:**     TSS     ACE

Account number: \_\_\_\_\_

**Uni-Select:**     SAX     DAVE (Canadian Tire)     Speedy     Midas     Kal Tire     Other \_\_\_\_\_

Account number: \_\_\_\_\_

**Collins Auto Parts:**     WIP (Online ordering)     Other: \_\_\_\_\_

\_\_\_\_\_