



CREDIT CONTRACT/APPLICATION: RETURN FAX NUMBER 416-249-8912 Attn: Jamie Fazio

NAME: _____ PHONE: (____) _____

ADDRESS: _____ FAX: (____) _____

CITY: _____ PROV. _____ POSTAL CODE: _____ ESTABLISHED IN: _____

MAILING ADDRESS FOR INVOICES/STATEMENTS IF DIFFERENT:

ADDRESS _____ CITY _____ PROV. _____ P/CODE _____

PURCHASE ORDERS REQUIRED: YES ___ NO ___ EMAIL ADDRESS: _____

ENTITY: CORPORATION ___ PARTNERSHIP ___ INDIVIDUAL ___ DATE OF BIRTH (INDIVIDUAL) _____

COMPANY OFFICERS:

NAME (1) _____ TITLE: _____ NAME (2) _____ TITLE _____

BANKING INFORMATION:

BANK _____ ACCT NO. _____ PHONE (____) _____

ADDRESS _____ CITY/PROV. _____ MANAGERS NAME _____

MAJOR SUPPLIERS:

(1) NAME: _____ CITY _____ PHONE (____) _____

(2) NAME: _____ CITY _____ PHONE (____) _____

(3) NAME: _____ CITY _____ PHONE (____) _____

LIST OF EQUIPMENT OWNED OR RENTED:

EQUIPMENT DESCRIPTION (MODEL AND S/N)	OWNED/RENTED	MORTGAGED OR RENTED FROM:
(1) _____	_____	_____
(2) _____	_____	_____
(3) _____	_____	_____

The applicant agrees should credit be extended payments shall be made by the 30th day following the day on which credit was given. (NET 30 DAYS). Service charge will be made on overdue accounts at the rate of 2% per month (24% per annum). Should the service of any agency or attorney be necessary to collect amount outstanding the applicant agrees to pay all cost of such collections, including reasonable attorney fee. The applicant warrants the information herein is true, correct and complete and that no relevant information has been withheld.

TERMS:

No Goods can be returned without prior authorization in writing and a copy of the invoice(s). Special orders from factory are returnable for credit. If goods are accepted for return a 20% minimum charge will be made for re handling etc and such goods must be delivered to the company's place of business by the customer with the charges prepaid. If credit for return goods or any correspondence concerning the invoice(s) is required, you must refer to the invoice number. Claims for error or imperfections should be made in writing within five (5) days of receipt of goods.

The applicant hereby authorizes "Equipment Sales & Service Limited" (ESS) and/or "Komatsu International (Canada) Inc." (Komatsu) to obtain from time to time such credit reports and personal or other confidential information about the applicant as ESS and/or Komatsu may determine necessary in connection with the establishment and maintenance of a credit account for the application as permitted by law. The applicant authorizes ESS and/or Komatsu to provide information which it received relating to the applicant to credit bureaus, other credit grantors and other parties as permitted by law. The Applicant authorizes each of the financial institutions referred to above and each of the credit references provided herein to disclose to ESS and/or Komatsu and its authorized agents all information held by such persons pertaining to the applicant.

Please remit payment to: Equipment Sales & Service Limited (1030 Martin Grove Road, Toronto, ON, M9W 4W3)
For equipment financed through Komatsu contact Komatsu International (Canada) Inc. directly.

SIGNATURE

PLEASE PRINT NAME

TITLE

DATE


1030 Martin Grove Road
Toronto, ON M9W 4W3
tel: 416-249-8141
toll free: 1-800-268-0679
fax: 416-249-8912

15 Mumford Drive
Sudbury, ON P3Y 1K9
tel: 705-692-7278
toll free: 1-800-334-5154
fax: 705-692-1717

234 Exeter Road
London, ON N6L 1A3
tel: 519-652-6160
toll free: 1-800-959-5516
fax: 519-652-0377

2783 Carp Road
Ottawa, ON K0A 1L0
tel: 613-831-9222
toll free: 1-800-463-7011
fax: 613-831-9297