

**ACCOUNT OPENING FORM****ALIMENTS KOYO INC.**

4605 Hickmore St-Laurent H4T 1S5 www.koyofoods.com  
 T.514-744-1299 F. 514-744-0882 E. koyo@koyofoods.com

Votre distributeur de produits naturels  
 biologiques et macrobiotiques

**BUSINESS CONTACT INFORMATION**

Legal company name				
Company name				
Business number				
Billing address				
City	Province	Postal Code		
Tel	Fax	E-mail		
Business type	Retail	Catering	Restaurant	Bakery Gym
Other : _____				
HFN member	Yes	No		
Date of establishment				

**SHIPPING INFORMATION**

Shipping address (if different from billing address)				
City	Province	Postal Code		
Tel	Fax	E-mail		
Loading Dock	Yes	No		

**DEPARTMENTAL PURCHASING INFORMATION**

Contact name	
Tel	Fax
E-mail	Department
Contact name	
Tel	Fax
E-mail	Department

**ACCOUNTING INFORMATION**

Contact name	
Tel	Fax
E-mail	Department
Contact name	
Tel	Fax
E-mail	Department

**ACCOUNT OPENING FORM**



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BANKING INFORMATION			
Financial institution			
Address			
City	Province	Postal Code	
Tel	Fax	Account#	
Contact name			

TRADE REFERENCES			
Legal company name			
City	Province	Postal Code	
Tel	Fax		
Contact name			
Legal company name			
City	Province	Postal Code	
Tel	Fax		
Contact name			
Legal company name			
City	Province	Postal Code	
Tel	Fax		
Contact name			

Aliments Koyo Foods Inc. reserves the right to charge 2% monthly interest on all overdue balances. The undersigned hereby acknowledges that the information here stated is true and subjected to investigation. The above trade reference information is for the use of our credit department, and will be kept in strict confidence.

Thank you for your cooperation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
GST#

\_\_\_\_\_  
PST#

\_\_\_\_\_  
HST#

\_\_\_\_\_  
Business number NEQ/NE Canada