

New Customer Form



***No credit required by customer**

PO Box 53566 Ellerslie PO, Edmonton AB, T6X 2C2
 1-888-560-5595 - info@advantagevm.ca - www.advantagevm.ca

Company Name: _____		Phone: _____	
Mailing Address: _____			
City: _____		Prov./State: _____	PC/Zip: _____
Email: _____		Website: _____	
Legal Form of Business: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship		<input type="checkbox"/> Government Business <input type="checkbox"/> Co-op <input type="checkbox"/> Other	
Years in Business: _____		Date of Incorporation: _____	
Type of Business (Applicator/Municipality etc.): _____			
Tax Exempt: <input type="checkbox"/> Yes <input type="checkbox"/> No		Tax Exempt No.: _____	
<i>Note: Certificate or no. must be provided or tax will be charged</i>			
Provincial Pesticide License Number: _____		Expiry Date: _____	
Pesticide Service Registration Number: _____		Expiry Date: _____	
Previous or Associated Business Names (if applicable): _____			
<u>Company Contacts:</u>	<u>Title:</u>	<u>Phone:</u>	<u>Email:</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Shipping Details			
Shipping Address: _____			
City: _____		Prov./State: _____	PC/Zip: _____
Contact: _____		Phone: _____	
Preferred Carrier: _____			

Terms and Agreement	
The Applicant hereby understands and agrees to the following and warrants that with consideration of the materials and services provided:	
1. Payment to AdvantageVM Corp. (AdvantageVM) for the invoice amount of all materials and services are cash in advance or prepayment by e-transfer, Visa or MasterCard.	

Completed forms can be return via email to: julie@advantagevm.ca
 All information received is strictly confidential and for AdvantageVM's use ONLY