Cash Contractor Form

(1) (1) (1) (1)						Date
KENT						
The Committee of the Co						Clerk # & Name
Company Name						
	(Please print - If no cor	mpany name please enter in	Contact Name)			Branch Name & #
Contact Name						TO SECULT VICTORY PROCESSOR
	(Please print - This sho	ould be the prime contact of	the Above Compnay	1		
Street Address						Store Use Only
Street Address					_	
City/Town			Province		Postal Code	
Telephone #			_ Fax#		Cellular #	
Type of Business/Project Years in Business						
(Contractor, PRO Renovato		or Renovation, Electrician	, etc,)			
Do you have a Kent	Charge Account?	Y/N		Email Address		
If so, what is the Accoun	200					
I would like to receive exclusive co						cial offers and
[2:17] [2:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18] [3:18]				correspondence. YESNO		
	a Brivata Uama E	Duild on Home Bone	votion Only As			
Fill out only if this is	a Private nome c	sulid or Home Reno	vation Only Ap	phication		
	Are you doing th	e work yourself?	Y/N			
	2 If you are using	a contractor what is the	is Nama/			
If you are using a contractor what is their Name/ Construction Company?						
3. How long is the project expected to last?						
			···			
	It is under	stood that this is a ca	ash account onl	y and not a 30 day credit	account.	
Name				7.		
(Please Print)						
Signature						
Date	-					
		Foi	r Store Use	Only		
Store #	T	Customer Coding		Approved by	1	Account #
	Customer Code #	Price Level	Front Level	CONT. PROPERTY CONTROL OF THE CONTRO	 	
Customer Confere					L	
Customer Coding 1 = Trade (Electrician, Plumt	per, Painters, Roofer,	12 = Pro Renovator (Reno	ovator, Contactor)	5 = Registered Construction (Company	
etc)						
3 = Private Home Builder/ Ho	ome Renovation	6 = Government		15 = Institutional (Farm, Hotel,	Hospital, Etc)	
		Fax Applic	ation back to	506-693-7015		