

# MMAX GROUP (Canada) Inc.

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## ACCOUNT APPLICATION

NAME OF BUSINESS: \_\_\_\_\_ YEAR STARTED: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Month / Year)

TYPE OF BUSINESS:     Sole Proprietor             Partnership             Incorporation

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TEL: (     ) \_\_\_\_\_ FAX: (     ) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

GST & PST NUMBER: \_\_\_\_\_

CONTACT: \_\_\_\_\_ TITLE: \_\_\_\_\_

TYPE OF BUSINESS:     RETAILER     MANUFACTUER     WHOLESALER  
                           BROKER         DEALER         CONSULTANT     SERVICE     OTHER \_\_\_\_\_

### REFERENCE:

BANK NAME: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TEL: (     ) \_\_\_\_\_ FAX: (     ) \_\_\_\_\_ CONTACT: \_\_\_\_\_

**TRADE:**            Please exclude Ingram Micro and Tech Data

	<u>NAME</u>	<u>ADDRESS</u>	<u>TEL#</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Signature of Owner, President: \_\_\_\_\_ Print Name: \_\_\_\_\_

(or authorized officials) \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_