

**Canada**  
41-A Butterick Road  
Toronto, Ontario M8W 4W4

**U.K.**  
Blackthorne Road  
Poyle, Berkshire SL3 0DA

**U.S.A.**  
60 Industrial Parkway, Suite 776  
Cheektowaga, NY 14227



email: sales@metrotea.com website: www.metrotea.com

**Communications**

World  
Tel: +1 (416) 588 0089  
Fax: +1 (416) 588 7040

Freephone - UK and Europe  
Tel: +44 (0) 800 043 0351  
Fax: +44 (0) 800 043 0122

Toll Free - Canada and U.S.A.  
Tel: 1 (800) 388 0351  
Fax: 1 (800) 319 8327

**CREDIT APPLICATION**

Legal Company Name / DBA		Description of Business	
Billing Address	City	Province / State	Postal Code / Zip
Shipping Address	City	Province / State	Postal Code / Zip
Company Website		Company E-mail Address	
Contact Name for Payments	Telephone Number	Fax Number	E-mail Address
Contact Name for Orders	Telephone Number	Fax Number	E-mail Address
Contact Name for Shipments	Telephone Number	Fax Number	E-mail Address
Date Company Established	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Incorporated	Number of Employees	
Affiliated Companies (if any)	Provincial Sales Tax Number (Ontario only)	Federal Tax ID Number (US only)	

**TRADE REFERENCES**

Name	Address	Telephone Number	Fax Number
Name	Address	Telephone Number	Fax Number
Name	Address	Telephone Number	Fax Number

**BANK INFORMATION**

Bank Name	Contact	Telephone Number
Branch Address	Date Account Established	Account Number

**OWNER INFORMATION**

Last Name	First Name	
Residence Address		
City	Province / State	Postal Code / Zip Code
Phone Number	E-mail Address	

I acknowledge that the information submitted in this application is accurate and complete. I also give The Metropolitan Tea Co. authorization to confirm all trade references, as stated above.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

**CREDIT CARD PAYMENT REQUEST**

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	Credit Card Number	Exp Date	Name on Credit Card
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I authorize the Metropolitan Tea Company Ltd. to charge my credit card for the orders, which I may place from time to time. I agree to pay the total amount invoiced according to card issuer agreement.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_



PARIS



SAN FRANCISCO



VANCOUVER



TORONTO



EDMONTON