

## Account Application

- Dicom transport services (with free membership cards for employees, available in french only)**  **and GoJIT services**  
 **Employee membership cards with annual cost (without Dicom or GoJIT account)**

Business Name : \_\_\_\_\_

Address : \_\_\_\_\_

House number

Street

P.O. Box

City/Town

Province

Postal Code

Sector of Activity : \_\_\_\_\_ Telephone : (     ) \_\_\_\_\_

Number of employees\* : \_\_\_\_\_ FAX : (     ) \_\_\_\_\_

\*Please include all departments and locations

Email : \_\_\_\_\_

### Bank details

Financial Institution : \_\_\_\_\_

Name

Address

Account Number : \_\_\_\_\_

### Credit references (indicate 2 references)

1) \_\_\_\_\_

2) \_\_\_\_\_

### Contact person

Person responsible for shipping : \_\_\_\_\_

Person responsible for accounts payable : \_\_\_\_\_

Person responsible for human resources : \_\_\_\_\_

### Important

- Interest of 1% per month (12% per year) will be added to all accounts unpaid after 30 days of the billing date and 10 \$ for each NSF cheque.

### Cancellation :

- This agreement may be cancelled by either of the two parties involved, via notice of 30 days in writing.

### Accepted by :

Application responsible (written in cursive)

Title/Position

Authorized signature

Date

**Please FAX this form to 418 574-3952**