



**“Industry’s Experts with a Great Selection!”**

# Wholesale Application

This application is to identify customers who are resellers of Irrigation products. Resellers of irrigation products would include irrigation installer, retail stores, landscaping companies. To be approved for a Wholesale account the information must be provided in full and information will be verified by Wes-Tech Staff. This is **not** a credit application.

**Return Completed Form to:** [Accounts@irrigation.ca](mailto:Accounts@irrigation.ca)

Registered Legal Company name: \_\_\_\_\_

Trade Name if Different: \_\_\_\_\_

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

Postal Code: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Year Established: \_\_\_\_\_

**Main Contact:**

Name: \_\_\_\_\_ Ph#: \_\_\_\_\_

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

**Accounting Contact:**

Name: \_\_\_\_\_ Ph# : \_\_\_\_\_

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

Type: Corporation  Partnership  Sole Proprietorship  Government  Not-for-Profit

GST# \_\_\_\_\_ (Required) PST# \_\_\_\_\_ (if exempt)

PST exempt (farmer)? Yes  No  If yes attach Exemption Certificate or photo copy of Farmer ID

**Purchasing Contact**

Name: \_\_\_\_\_ Ph#: \_\_\_\_\_

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

Authorized purchasers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Purchase order required Yes  No

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

Name(printed): \_\_\_\_\_

**OFFICE USE ONLY**

- PST Number Verified \_\_\_\_\_
- GST Number Verified \_\_\_\_\_
- Wholesale approved. \_\_\_\_\_
- Salesperson \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_