



Just say it... your way!  
Original Blank Greeting Cards

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

## MERCHANT ACCOUNT APPLICATION

### SELLING MANUFACTURER

**GROUPE CARTAFIORE RPM INC.**

1036, rue Principale  
Prévost, QC J0R 1T0

E-mail: [info@cartafiore.com](mailto:info@cartafiore.com)

Tel.: 514 577-1747

Fax: 450 335-3354

Sales representative: \_\_\_\_\_

(To be assigned according to area)

The undersigned wishes to become a Distributor and offer Cartafiore products at his business location.

### RETAIL MERCHANT

**BUSINESS LOCATION**

\_\_\_\_\_  
(Company name)

\_\_\_\_\_  
(civic #) (street)

\_\_\_\_\_  
(city / town) (province) (postal code)

Tel.: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**BILLING INFORMATION**

\_\_\_\_\_  
(Bill to)

\_\_\_\_\_  
(Accounting manager)

Tel.: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**OWNER INFORMATION**

\_\_\_\_\_  
(Company owner's name)

Same address as business.

or

\_\_\_\_\_  
(civic #) (street)

\_\_\_\_\_  
(city / town) (province) (postal code)

Tel.: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**ACCOUNT MANAGER**

\_\_\_\_\_  
(Full name of person in charge of this account)

Tel.: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Initials

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Groupe Cartafiore RPM inc.

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**APPLICANT DECLARATION**

I hereby agree that, **if my application is accepted**, the above will constitute a legal agreement that will make me responsible for any orders of Cartafiore products placed in the name and delivered to the business location of the Retail Merchant whose information is mentioned above.

\_\_\_\_\_  
(Applicant signature)

**Risk free trial guarantee!**

Install one of our displays in your place of business and if your change your mind within the first six months, we will take it back and **will fully reimburse all unsold products.**

**To complete the procedure**

**Send us your application by fax at 450 335-3354 or by e-mail at [info@cartafiore.com](mailto:info@cartafiore.com)**

We will contact you promptly to provide information on how we proceed.

----- **STARTUP ORDER** -----  
(To be completed by your Cartafiore sales representative)

Delivery date: \_\_\_\_\_

Items delivered:

- #PRP-25 – **5-sided Floor display** containing **25 full-sized card models** (250 cards in all)
- #PRP-48 – **4-sided Floor display** containing **48 full-sized card models** (480 cards in all)
- #PRC-mixt – **Counter display** containing **8 full-sized and 4 small card models** (120 cards in all)
- #PRC-mini – **Counter display** containing **20 small-sized card models** (200 cards in all)

I hereby acknowledge receipt of the selected items, agree to the terms and conditions which were fully explained to me by my sales representative and promise to honor such obligations.

\_\_\_\_\_  
(Merchant signature)