

ACCOUNTS RECEIVABLE REQUEST



APPLICATION DATE	CUSTOMER ACCOUNT #:	PST <u> </u> Y/N
COST CENTER #:	SAP INTERNAL ORDER #:	GST <u> </u> Y/N
	REVENUE CODE:	LPC <u> </u> Y/N
APPLICANT (IF INDIVIDUAL, PUT LAST NAME FIRST)		

BILLING ADDRESS 1
DESCRIPTION OF WORK

LOCATION OF WORK

DEPARTMENT POLICY/STANDARD (IF APPLICABLE):

SIGN DETAILS:

REMARKS:

TOTAL: \$

PAYMENT DUE: 30 DAYS FROM THE DATE OF INVOICE. A PER ANNUM INTEREST RATE WILL BE APPLIED COMMENCING ON THE FIRST DAY PAST DUE

DO NOT SUBMIT CHEQUE WITH THIS DOCUMENT. THE INVOICE WILL BE SENT OUT TO THE ABOVE STATED ADDRESS ONCE THE SIGNS ARE INSTALLED AND THE PROJECT IS COMPLETE.

(PST) Provincial Sales Tax, (GST) Goods & Services Tax, (LPC) Late Payment Charges will be applied as required.

WORK REQUESTED BY (PRINT NAME): _____

APPLICANT'S SIGNATURE: _____ **PHONE NO.** _____