## CUSTOMER APPLICATION FORM

LGA will provide Manitoba Liquor and Lotteries with your basic account information once becoming licensed. Manitoba Liquor and Lotteries requires further detailed information to facilitate the set up as a Manitoba Liquor and Lotteries customer. Please be as detailed as possible when completing this Customer Application Form.

MANITOBA LIQUOR \& LOTTERIES


Please provide a Manitoba Retail Sales Tax Number in order to be exempt from PST on Purchases:
$\square$
PRE-AUTHORIZED DEBIT (PAD) AGREEMENT \& AUTHORIZATION Authorization of the Payor to the Manitoba Liquor and Lotteries to Direct Debit an Account

| Financial Institution Name: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Branch Name: |  |  |  |  |  | Branch Address: |  |  |  |  |  |  |  |  |  |  |  |
| City/Province: |  |  |  |  |  | Postal Code: |  |  |  |  |  |  |  |  |  |  |  |
| Branch Transit \#: |  |  | Institution Number: |  |  | Bank Number: |  |  |  |  |  |  |  |  |  |  |  |

## Please attach a specimen cheque (which has been marked "VOID" to this authorization.

By signing below, you, the Customer, hereby authorize Manitoba Liquor and Lotteries to draw a debit in paper, electronic or other form from the bank account identified above at the financial institution indicated for payment of all charges/fees arising from the placement by you of an order for Manitoba Liquor and Lotteries products and services.
You acknowledge that payments under this PAD Agreement will be for variable amounts and when required in response to an Order placed by you. You confirm that the debits authorized under this PAD Agreement are for business purposes and that this PAD Agreement is a "Business PAD".
You agree to notify Manitoba Liquor and Lotteries, in writing, of any change in the account information provided in this PAD Agreement. A new customer will be on two-day terms. After three months, you may apply to have terms extended to the maximum term of 30 days. If a license is subsequently cancelled or terminated, all outstanding amounts become payable immediately.

| Name of Signatory (print): |  | Title of Signatory: |  |
| :--- | :--- | :--- | :--- |
| Authorized Signature: |  |  |  |
| Date: |  |  |  |

