

(PLEASE PRINT)

TYPE OF ACCOUNT:      NET 30              PROFORMA/COD              COD  
BUSINESS NAME \_\_\_\_\_  
BUSINESS ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_  
EMAIL \_\_\_\_\_ WEBSITE \_\_\_\_\_

RESALE CARD ENCLOSED:      YES      NO  
DATE ESTABLISHED \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

SOLE OWNERSHIP              PARTNERSHIP  
INDIVIDUAL(S):  
NAME (1) \_\_\_\_\_ (2) \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
S.S.# \_\_\_\_\_

CORPORATION:              YES              NO              TAX I.D.# \_\_\_\_\_  
IF YES, PLEASE LIST OFFICERS & POSITIONS:  
1. NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
2. NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
3. NAME \_\_\_\_\_ TITLE \_\_\_\_\_

BANK INFORMATION:  
NAME OF BANK \_\_\_\_\_  
PHONE ( ) \_\_\_\_\_ ACCT. # \_\_\_\_\_

TRADE REFERENCES (IF APPLYING FOR NET 30 TERMS):  
1. NAME \_\_\_\_\_ ACCT. # \_\_\_\_\_ PHONE ( ) \_\_\_\_\_  
2. NAME \_\_\_\_\_ ACCT. # \_\_\_\_\_ PHONE ( ) \_\_\_\_\_  
3. NAME \_\_\_\_\_ ACCT. # \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

**TURN AND READ THE TERMS AND CONDITIONS ON THE BACK. SIGNATURE IS REQUIRED.**

I HEREBY AUTHORIZE YOU TO RELEASE ANY INFORMATION REGARDING MY ACCOUNT TO COMPANY

PRINT NAME

SIGNATURE