



NEW CUSTOMER ACCOUNT SETUP FORM AND CREDIT APPLICATION

29830 Beck Rd. Wixom, MI 48393-2824
(248) 624-5555 Fax (248) 624-0538

Maximum credit applied for: \$
(Please type or print)

CUSTOMER NAME & DBA (IF APPLICABLE):

BILL TO: SHIP TO:
Residential Address: Commercial Address:

PURCHASING CONTACT: PHONE: FAX:

AUTHORIZED PURCHASERS:

SHIPMENT PREFERENCES: SHIP PARTIAL: COMPLETE ONLY:

COLLECT: If collect, please provide freight collect acct# and company

IS P.O. REQUIRED? OTHER SHIPMENT PREFERENCES:

ACCOUNTS PAYABLE CONTACT: PHONE:

FAX: EMAIL:

TAXABLE: EXEMPT: IF EXEMPT, PLEASE FAX EXEMPTION CERTIFICATE TO FAX NUMBER LISTED BELOW

FEDERAL I.D. #: DUN & BRADSTREET #:

DESCRIBE PRINCIPAL BUSINESS ACTIVITY

BANK & TRADE REFERENCES

BANK NAME: NAME:
FAX: PHONE: FAX: PHONE:
ACCT #: CONTACT:
CONTACT:

NAME: NAME:
FAX: PHONE: FAX: PHONE:
CONTACT: CONTACT:

If authorized to purchase on open account, items past due will incur a monthly service charge of 1-1/2% (18% APR).
The undersigned official, to induce the granting of credit to the above - named firm, guarantees the company's credit.

SIGNATURE: DATE:
Individually and as an officer of the firm.

FOR NLB USE ONLY:

SALESMAN: INDUSTRY TYPE:

COMMENTS:

PLEASE RETURN BY FAX: CORPORATE WIXOM, MI (248) 624-0538