

Company Name _____

Contact Information

Contact Name
Address

Phone
FAX
e-mail

Billing Information

AP Contact Name
Address

Phone
FAX
e-mail

General Company Information

Federal Tax ID Number
Duns Number
Tax Exempt? no yes (attach certificate)

Principal Officer
Title

Legal Structure
 Corporation
 Partnership
 Sole Proprietorship
 Other

Business type
 Manufacturer/OEM
 Electrical Distributor
 Panel Builder
 Other

In Business Since

Bank References

Bank Name(1)
Address
Contact
Bank Name (2)
Address
Contact

Account type
City/State/ZIP
Phone
Account type
City/State/ZIP
Phone

Credit Cards (if used for purchases)

Type (circle) Visa AmEx MasterCard
Name on Card

Number
Exp Date

Trade References

Company 1
Contact
Phone/Fax
Company 2
Contact
Phone/Fax

Company 3
Contact
Phone/Fax
Company 4
Contact
Phone/Fax

Signature & Authorization

The signature below represents and warrants that the party signing below is an authorized representative of the company, and that the information provided is a complete and accurate representation of the company.

Signature
Print Name

Title
Date