



# **THERMAL TECH & TEMP INC.**

## **NEW CUSTOMER/VENDOR APPLICATION FORM**

### **GENERAL INFORMATION:**

1. Firm or Business Name: \_\_\_\_\_

2. Doing Business As (DBA): \_\_\_\_\_

3. Street Address: \_\_\_\_\_

4. Billing Address: \_\_\_\_\_

5. City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

6. Telephone: \_\_\_\_\_

8. Please list all offices and/or affiliate addresses below: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. E-Mail Address: \_\_\_\_\_

10. Accounts Payable Contact Name: \_\_\_\_\_

11. Years in Business: \_\_\_\_\_ Federal Tax Number: \_\_\_\_\_

13. Type of Business:    \_\_\_\_\_ Sole Proprietorship    \_\_\_\_\_ Corporation

                                 \_\_\_\_\_ Partnership                                    \_\_\_\_\_ Subsidiary

14. Type of Work: \_\_\_\_\_

15. Proprietor, Partners, Officers (if incorporated): \_\_\_\_\_

Name: \_\_\_\_\_ Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Name: \_\_\_\_\_ Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

16. Year Business Established: \_\_\_\_\_ Years at Present Location: \_\_\_\_\_

18: List employee(s) names and titles that can sign contracts and/or authorize purchase orders/work orders on behalf of your company: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

19. Are you accredited by the Better Business Bureau?    \_\_\_\_\_ Yes    \_\_\_\_\_ No

20. D & B Number & Rating: \_\_\_\_\_

## BANKING INFORMATION:

1. Bank Name: \_\_\_\_\_
2. Street Address: \_\_\_\_\_
3. City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_
4. Account Number: \_\_\_\_\_
5. Bank Contact: \_\_\_\_\_
6. Phone Number: \_\_\_\_\_

## CREDIT REFERENCES:

1. Company Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
How long have you been doing business with this company? \_\_\_\_\_
2. Company Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
How long have you been doing business with this company? \_\_\_\_\_
3. Company Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
How long have you been doing business with this company? \_\_\_\_\_

I hereby warrant that the above information is true and correct, and is furnished for the purpose of establishing a vendor/customer relation with Thermal Tech & Temp, Inc. and/or Thermal Tech & Temp, Inc. clients. I hereby agree that Thermal Tech & Temp, Inc. may investigate my record and that, if approved, Thermal Tech & Temp, Inc. may furnish this authorization to secure the information they need to establish a business relationship.

\_\_\_\_\_  
(NAME)

\_\_\_\_\_  
(TITLE)