Thank you for your interest in doing business with Arizona White Rock, Inc. Please complete the information on the attached worksheet and return to us.

Please include a copy of any tax exemption certificates or documentation. If we do not receive tax exemption information we will charge applicable sales or use tax on your purchases.

We also request a copy of your general liability insurance certificate.

Our customer payment terms and credit limits are established based on the information you provide, please let us know if you have any questions.

Attached are our standard terms and conditions.

For your records, our information is included below.

Arizona White Rock, Inc. PO Box 5214 Tucson, Arizona 85703 Office: 520 344-9856 Jeff: 520-977-5941

Jessie: 520-358-0763 Arizonawhiterock@gmail.com



Credit Information - Return by email to: ArizonaWhiteRock@gmail.com

CUSTOMER INFORMATION:		Date:
Company Name:		
Billing Address:		
Telephone:		
Accounts Payable Contact Name:		
Phone/Fax:	Email:	
Shipping/Site Address:		
Telephone:	Fax:	
Billing County:		
Sole Proprietorship Partnership		FEIN:
How Long in Business:		
CREDIT AMOUNT REQUESTED:	_	
PRINCIPALS		
Name:	Title:	
Name:	Title:	
FINANCIAL INFORMATION:		
Current Assets:	Current Liabilities:	
Total Assets:	Total Debt:	
Net Income:	— Sales:	
BANK INFORMATION:	_	
Name:	Account No.:	
Address:		
Telephone:	Fax:	
Contact Person:		
TRADE REFERENCES:		
Vendor:	Contact Name:	
Address:		
Telephone:	Fax:	
Vendor:	C	
Address:		
Telephone:	Fax:	
Vendor:		
Address:		
Telephone:	Fax:	
I hereby authorize release of usual and customary cre the purpose of credit evaluation		
Print Name	Title	_
Signatura	Data	