Federal I.D. #	
Legal name:	_ Business name:
Billing address:	State: Zip code:
Shipping address:	City: State: Zip code:
Tel # Fax#	
Name of Directors / owners	
CorporationPartnershipsole ownershipother	
Purchasing Contact Information Contact Name:	Accounts Payable Contact Information (if different) Contact Name:
Telephone #:	Telephone #:
Fax #:	Fax #:
E-mail address:	E-mail address:
Bank Information	E man address.
	Zip Code:
	Contact:
	ation to the seller in order to obtain from the seller a line of credit.
(Name in print form)	Date:
TRADE REFERENCES:	_
Fax#	Contact:
Fax#	Contact:
Fax#	Contact:
CONDITIONS: The buyer agrees to pay any service or collection one to recover past due invoices.	charges levied by a third party should it become necessary to engage
	at be authorized in advance by the seller, be sent prepaid, are subject to the right to make the final determination to replace, repair or credit
property of the seller until all sums, invoiced or no	nt and future, sold by the seller to the buyer shall remain the sole ot, due to the seller have been paid in full.
The buyer shall assume all costs and risks pertainivendor to the buyer, from the vendor's place of bu	ng to the transportation of the products sold and distributed by the
	pletely, partially or not at all any of the buyer's orders even if it has
already been accepted and/or confirmed.	3/1
SIGNATURE:	D.4.
Signed at:(City) (St	, Dateate)
The undersigned acknowledges having read and undersigned	stood entirely the present agreement and also declares that to the best
of his/her knowledge, all the information contained her	
	(Print) X (Signature)
(Print) This document must be signed where signeture is reserved.	(Print) (Signature) ested marked by an "X", and must be signed by an individual duly
authorized to sign for or on behalf of the huver	and marked by an are, and must be signed by an individual duly

Please provide Reseller Certificate along with the present completed document