



OPEN ACCOUNT APPLICATION

LIMIT \_\_\_\_\_

Firm Name: \_\_\_\_\_ Date: \_\_\_\_\_

Doing business as: \_\_\_\_\_  Corporation  Partnership  Proprietorship

Billing address \_\_\_\_\_  
(Street address) (City; State; Zip)

Shipping address \_\_\_\_\_  
(Street address) (City; State; Zip)

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Federal ID # \_\_\_\_\_ How long in business? \_\_\_\_\_ Annual sales \_\_\_\_\_

**NAME AND TITLES OF COMPANY OFFICERS OR OWNERS; PAYABLES CONTACT:**

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(Street address) (City; State; Zip)

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(Street address) (City; State; Zip)

Payables contact \_\_\_\_\_ Fax # \_\_\_\_\_ Phone # \_\_\_\_\_

Is a purchase order required  Yes  No If **NO**, name those authorized to purchase \_\_\_\_\_

**PLEASE LIST 4 FIRMS FROM WHOM YOU BUY OPEN ACCOUNT:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

**PLEASE ENTER BANK INFORMATION:**

Bank name \_\_\_\_\_ City/State \_\_\_\_\_ Contact \_\_\_\_\_

Fax # \_\_\_\_\_ Phone # \_\_\_\_\_ Checking account # \_\_\_\_\_

Do you agree to Net 30 terms?  Yes  No

Do you agree to pay late charges for over due accounts?  Yes  No

Applicant hereby authorizes the above named firms and banking institutions to furnish information requested by Custom Trans, Inc. to process their application, and agrees that the said persons shall not be liable for any claim or damages as a result of furnishing the requested information. Applicant hereby acknowledges and accepts the terms and conditions applicable to all work performed by Custom Trans, Inc. which are included on the rear of this application.

TERMS: Our terms are C.O.D. on delivery. Credit terms will be granted upon presentation of satisfactory financial information and references. If open account is granted payment of net amount due will be due by the 10<sup>th</sup> of the following month, in US funds. Service charges of 2% per month are applied to all unpaid overdue balances, all billing fees, and the cost of collections and any court costs will be added to the principle amounts on past due monies.

Name (print) \_\_\_\_\_ Name (sign) \_\_\_\_\_ Title \_\_\_\_\_