

CREDIT APPLICATION

PLEASE FILL OUT AND RETURN TO: sales@cutandcouple.com

P.O. BOX 13180 DAYTON, OH 45413

PH: (866) 641-8851 FAX: (937) 454-2086

APPLICANT INFORMATION						
Company Name:						
Years in Business:		ss:	Tax ID#:			
Address:						
City:		State:		ZIP Code:		
Telephone#:		Fax#:		Website:		
Please mark which one of the following applies with an X						
{ }P	Partnership { } Individua		ı	{ }Incorporated with past 12 months		
INVOICE TO INFORMATION						
Bill to Address:						
State:		ZIP Code:				
Accounts Payable Contact:						
Fax#:			Telephone#:			
Please mark your preferred method of payment with an X						
	{ } Check		<pre>{ } Credit Card (4% processing fee)</pre>			
SHIPPING INFORMATION						
Address 1:						
	State:		Zip Code:			
Address 2:						
	State:		Zip Code:			
Address 3:						
	State:		ZIP Code:			
Shipping Method Less than 150Ibs:		Collect#:				
Shipping Method Over than 150Ibs:			Collect	#:		
	mark you	State: Fax#: mark which one of t { }Partnership INVOICE TO State: Fax#: mark your preferred { } SHIPPING II State: State: State:	Years in Business: State:	Years in Business: Tax ID		



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BUSINESS REFERENCES:						
Reference 1:		Contact:				
Email:	Phone#:		Fax#:			
Reference 2:		Contact:				
Email:	Phone#:		Fax#:			
Reference 3:	Contact:					
Email:	Phone#:		Fax#:			
Reference 4:		Contact:				
Email:	Phone#:		Fax#:			
SIGNATURE						
I certify that all information on this form is correct. I fully understand our credit terms and agree to the proper payment in consideration of extended credit. Terms: NET 30 unless agreed upon by both parties.						
SIGN HERE:			DATE:			
TAX EXEMPTION						

Please fill out the sales tax exemption form (if applicable) on the next page, otherwise the appropriate sales tax will be charged to all invoices.



ministrative Code.

Reset Form

Sales and Use Tax Blanket Exemption Certificate

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from:					
	(Vendor's name)				
and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase or both, as shown hereon:					
Purchaser must s	tate a valid reason for claiming exc	eption or exemption.			
	Purchaser's name				
	Street address				
	City, state, ZIP code				
	Signature	Title			
	Date signed				
	Vendor's license number, if an	у			
under the "resale" exception. Otherwise trative Code. This certificate cannot be	e, purchaser must comply with either ruused by construction contractors to pu	use this certificate to purchase these items ule 5703-9-10 or 5703-9-25 of the Adminis- urchase material for incorporation into real must comply with rule 5703-9-14 of the Ad-			