SECOR

NEW CUSTOMER ACCOUNT SETUP FORM

Please fill out *completely* - Gray areas for SECOR accounting use only

	New Customer Setup	New Branch Setup	New Ship To	Customer Number:		
		PLEASE ESTIMATE N	MONTHLY PURCHASES			
Monthly Estimate		Credit Limit Requested:	Opening Order Amt:	Approved for:		
	*Orders MUST be Pre-Paid by Cr	redit Card or Wire Transfer until Credit Appli	cation is approved (If paid by check, or	der will NOT ship until check has cleared)		
ocation:	HOUSTON, TX GILLETTE, WY	PRINCETON (DALLAS), TX WHEATRIDGE, CO	ALBUQUERQUE, NM	Salesperson:		
Legal Name	e of Firm:					
Trade Nam	 e (dba):					
Purchasing	Contact:		Title:			
Phone:		Fax:	Email:			
Type of Bu	siness:		Yrs. In Business:	# of Employees:		
Company V	Website Address:					
	BILLING	ADDRESS		SHIP TO ADDRESS		
Address 1			Address 1			
Address 2			Address 2			
City	St	ate	City	State		
Zip Code	Co	ountry	Zip Code	County		
A/P Contac	ct		Country			
Phone	Fa	nx	Phone			
			Will Secor Product be Forwarded to Another			
A/P Email				Yes		
	☐ Purchase Order Required	☐ Purchase Order Not Required		Sales Rental		
CREDIT CARD INFORMATION				SHIP TO ADDRESS #2		
			Address 1			
Number			Address 2			
Val. Code		Exp. Date:	City	State		
Name			Zip Code	County		
Billing Add	ress		Country			
City	St	ate	Phone			
Zip Code	Co	ountry				
			JS REQUIRED ***			
	If no box is checked and	d proof of **exemption is not a	ttached, account will be not	ed as NOT EXEMPT and taxed		
	Not Exempt		Exempt (Please at	ttach proof of exemption)		
Taxpayer FEI#:			Resale Cert. #:			
**E	xemption Forms: Resale, M	ulti-jurisdiction, Direct Pay Permit	or Exempt Certificate. <u>W-9's ar</u>	nd Sales Licenses are NOT Acceptable.		

Customer's acknowledgement and agreement to all of Secor's Policies and General Terms & Conditions is a material term and continuing condition of becoming and remaining a SECOR

Customer and/or to obtain credit from SECOR."