|  |
| --- |
| Contact Information |
| Your Name | Click here to enter text.  | Title | Click here to enter text.  |
| E-mail | Click here to enter text.  | Phone | Click here to enter text.  |
|  |  |  |  |  |  |  |  |  |
| Business Information |
| Company Name | Click here to enter text.  |
| Physical Address | Click here to enter text.  |
| City | Click here to enter text.  | State | Click here to enter text.  | Zip Code | Click here to enter text.  |
| How Long at Current Address?  | Click here to enter text.  |
| Type of Business | [ ]  Sole Proprietorship [ ]  Partnership [ ]  LLC [ ]  Corporation [ ]  Other |
|  |  |  |  |  |  |  |  |  |
| Invoicing |
| Bill To Address | Click here to enter text.  |
| Ship To Address | Click here to enter text.  |
| E-Mailed Invoices | Click here to enter text.  | AP E-mail | Click here to enter text.  |
|  |  |  |  |  |  |  |  |  |
| Bank Information |
| Bank Name | Click here to enter text.  |
| Address | Click here to enter text.  |
| City | Click here to enter text.  | State | Click here to enter text.  | Zip Code | Click here to enter text.  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| Business References |
| Please provide us a minimum of three other companies your business has established credit with previously |
|  |  |  |  |  |  |  |  |  |
| 1 | Company | Click here to enter text.  | Contact Name | Click here to enter text.  |
| Phone | Click here to enter text.  | E-Mail | Click here to enter text.  |
| Address | Click here to enter text.  | Title | Click here to enter text.  |
| City | Click here to enter text.  | State | Click here to enter text.  | Zip | Click here to enter text.  |
| Comments | Click here to enter text.  |
|  |  |  |  |  |  |  |  |  |
| 2 | Company | Click here to enter text.  | Contact Name | Click here to enter text.  |
| Phone | Click here to enter text.  | E-Mail |  Click here to enter text. |
| Address | Click here to enter text.  | Title | Click here to enter text.  |
| City |  Click here to enter text. | State | Click here to enter text.  | Zip | Click here to enter text.  |
| Comments | Click here to enter text.  |
|  |  |  |  |  |  |  |  |  |
| 3 | Company | Click here to enter text.  | Contact Name |  Click here to enter text. |
| Phone | Click here to enter text.  | E-Mail | Click here to enter text.  |
| Address | Click here to enter text.  | Title | Click here to enter text.  |
| City | Click here to enter text.  | State | Click here to enter text.  | Zip | Click here to enter text.  |
| Comments | Click here to enter text.  |

Agreement

1. All invoices are to be paid 30 days from the date of the invoice.
2. We reserve the right to apply a 1.5% late fee to all overdue invoices.

*Please return to the following:*

*Fax: 713-983-9090*

*E-mail: ardept@hosespecialtyhouston.com*

1. By submitting this application, you authorize Reliable Hose Solutions to make inquiries into the banking and business/ trade references that you have supplied.

Signature Click here to enter text.

Title Click here to enter text.

Date Click here to enter text.