



CUSTOMER INFORMATION FORM

Company and Ship To Information		
Legal Name:	DBA:	
FEDERAL ID #		
Ship to Address:		
City:	State:	Zip Code:
Contact Name: _____	Phone: _____	Fax: _____
E-mail Address:		
Reseller: <input type="checkbox"/> Yes <input type="checkbox"/> NO	If yes, provide Resale Certificate for each applicable state. (e-mail back with form or Fax to 479-784-2193) (Seller's Permit does not meet requirement for deferring sales tax)	
Sales Tax exempt: <input type="checkbox"/> Yes <input type="checkbox"/> NO	If yes, provide Tax Exemption Certificate (e-mail back with form or Fax to 479-784-2193)	
Are PO's Required for invoicing: <input type="checkbox"/> Yes <input type="checkbox"/> NO	If yes, please list requirements	
Bill to Name:	Attn:	
Bill to Address:		
City:	State:	Zip:
A/P Contact:		
A/P Phone:	A/P Fax:	
A/P E-Mail:		

Please return this form with Resale or Exemption Certificate (if applicable).
 If credit terms are being requested please include credit application. Forms can
 be returned to: AccountsReceivable@wwlinc.com Fax to 479-784-2193 Attn:
 Accounts Receivable



Weldo, Williams & Lick, Inc.

Shipping Address 711 NORTH A STREET 72901-2121
Mailing Address PO Box 168 72902-0168
FORT SMITH, ARKANSAS, U.S.A.

Phone: 479-783-4113
Fax: 479-784-2193
1-800-242-4995

BUSINESS CREDIT APPLICATION

Legal Name: _____ Phone: _____

Address: _____ City: _____ State/Zip: _____

Name of Parent if Subsidiary: _____

Year Business was Established: _____ Fed. ID # _____

Business is Proprietorship Partnership Corporation Other

Name of Owners, or Officers: _____

Bill to Address: _____ City: _____ State/Zip: _____

Business References (Must have complete name, address and FAX number)

1. Name: _____ Fax: _____

Address: _____ Fax: _____

2. Name: _____ Fax: _____

Address: _____ Fax: _____

3. Name: _____ Fax: _____

Address: _____ Fax: _____

4. Name: _____ Fax: _____

Address: _____

Your Bank: _____ Phone: _____

Checking Account No.: _____

Approximate Net Worth: _____ Approximate Annual Sales: _____ Years in Business: _____

Are premises used solely for business purposes? _____

Building is: Owned Leased Length of Lease _____

A Financial Statement, including both Income Statement and Balance Sheet, should be submitted with this application.

I hereby certify that the information set forth above, together with all other information submitted in connection with this application is true and correct. I understand that Weldo, Williams & Lick, Inc. will rely on this information in extending credit to me. I have read and understand the Terms of Sale (Net 30 days from billing date on invoice) and agree that such terms apply to all transactions with Weldo, Williams & Lick, Inc

Print Name: _____ Signature: _____ Date: _____

President

President

PERSONAL GUARANTY (READ THOROUGHLY)

I hereby agree to pay to Weldo, Williams & Lick, Inc. all indebtedness now or hereafter owing by me to said company, whether individually, partnership or corporation.

In consideration of Weldo, Williams & Lick, Inc. extending credit to the above applicant, the undersigned does hereby individually and personally guarantee to Weldo, Williams & Lick, Inc. the sum or sums of money as may at any time hereafter become due to Weldo, Williams & Lick, Inc. from said applicant for goods sold to the applicant whether said indebtedness be in form of notes, bills, or open account. If it becomes necessary to enforce this guaranty by suit, I agree to pay interest and attorney fees as allowed by law.

Print Name: _____ Signature: _____ Date: _____