



APPLICATION & AGREEMENT FOR OPEN ACCOUNT (Commercial)

Acct Name _____ Date Business Opened _____

Billing Address _____ City _____ State _____ Zip _____

Ship to Address _____ City _____ State _____ Zip _____

Phone#: _____ Fax# _____ Tax Exempt: ___ Yes (If yes, must provide copy) ___ No

Please check one: ___ Corporation ___ Partnership ___ Sole Proprietor ___ LLC

President/Owner(s) Name _____

Treas/Controller Name _____

Amount of Credit Requested \$ _____

Accounts Payable Contact Name _____

Accounts Payable Email _____

Do you require a purchase order _____ (yes or no)

Would you prefer invoices and statements sent via: US Mail ___ Fax ___ Email ___ (check one)

TRADE REFERENCES: (Must Supply 3 references and include the fax number or email of credit contact.) (Please note: Banks are NOT accepted as a valid trade reference.)

1. _____ Phone _____

Fax _____ Email _____

2. _____ Phone _____

Fax _____ Email _____

3. _____ Phone _____

Fax _____ Email _____

APPLICANT'S AUTHORIZATION & AGREEMENT

In support of this application, B & J Welding Supply is hereby authorized to obtain credit and/or financial information from my/our bank(s), other financial institutions or commercial firms with whom I/we have done business.

It is understood that any such credit and/or financial information will be held in strict confidence and used only in consideration of this application.

Upon approval of this application, it is agreed that each invoice will be paid in full upon receipt or in accordance with the terms of sale of Net 30 or as stated on the invoice(s).

Should I/we not pay B & J Welding Supply according to the terms agreed upon, it is understood that credit privileges may be withdrawn.

Should B & J Welding Supply find it necessary to obtain assistance in collecting any past due balance, I/we agree to pay finance charges assessed each month (or such other rate allowable by State law), reasonable attorney fees, collection fees and/or court costs allowable by law.

Claims arising from/or do to dispute for invoices must be made within seven working days.

SIGNATURE _____ **DATE** _____
(Must be signed by an officer or principal of the firm)

TITLE _____ **PHONE** _____

PERSONAL GUARANTEE

The undersigned, [print name] _____, of the applicant corporation/company hereby agrees to the above terms and conditions and assumes personal responsibility for payment of said corporation's/company's account.

(An individual) **DATE** _____

CREDIT DEPARTMENT USE ONLY

CUSTOMER# _____ **CREDIT LIMIT** _____ **TERMS** _____

APPROVED BY _____ **DATE** _____



CYLINDER RENT/LEASE AGREEMENT

ACCOUNT NAME: _____ CUSTOMER #: _____

SHIP TO ADDRESS: _____

CONTACT NAME: _____ PHONE #: _____

<u># OF CYLINDERS</u>	<u>SIZE</u>		<u>GASES</u>	<u># OF CYLINDERS</u>	<u>SIZE</u>		<u>GASES</u>
		CF	OXYGEN			CF	ACETYLENE
		LB	CO2			CF	MIX GAS
		CF	ARGON			CF	HELIUM
		CF	NITROGEN			EA	LIQUID DEWARS
		CF	NIT OXIDE			CF	PROPYLENE
		CF	PROPANE				

_____ I AGREE TO PAY MONTHLY CYLINDER RENT UPON RECEIPT.
 _____ I AGREE TO PAY YEARLY CYLINDER LEASES UPON RECEIPT OR WITHIN 30 DAYS.

**** I UNDERSTAND THE CYLINDERS ARE THE PROPERTY OF B & J WELDING SUPPLY AND THE COMPANY NAMED ABOVE IS RESPONSIBLE FOR THE LOSS AND/OR DAMAGE TO THE CYLINDERS WHILE IN THEIR POSSESSION. ****

CUSTOMER SIGNATURE: _____ DATE: _____

EMPLOYEE SIGNATURE: _____ DATE: _____