

CALIFORNIA TOOL & WELDING SUPPLY

RIVERSIDE • BARSTOW • HESPERIA • LANCASTER • SAN BERNARDINO • VICTORVILLE • MONTCLAIR • SANTA ANA • FONTANA • CORONA
CASH (C.O.D.) APPLICATION

For Office Use Only:		Account# _____
Approved <input type="checkbox"/>	Date _____	
Denied <input type="checkbox"/>	Approved by _____	

PLEASE COMPLETE AND RETURN ASAP

MAIN OFFICE (951) 300-2543
201 N. MAIN ST. FAX (951) 300-0090
RIVERSIDE, CA 92501

The following information is being submitted for the purpose of obtaining a cash account and any goods and services sold pursuant to this application shall be on the terms and conditions set forth and this application shall become a part of all future contracts whether written, oral or mixed.

Business Name/Person's Name (Complete Legal Name) _____

BUSINESS ADDRESS _____	CITY _____	ST _____	ZIPCODE _____
BILLING ADDRESS _____	CITY _____	ST _____	ZIPCODE _____
TELEPHONE _____	TYPE OF BUSINESS _____		
FAX _____	WHEN ESTABLISHED _____		

OWNERSHIP: CORPORATION PARTNERSHIP SOLE PROPRIETOR

FEDERAL ID# _____ Social Security # _____

Contact Name: _____ Phone #: _____ Email: _____

Resale # _____ Please attach resale card if applying for non-taxable status.

TERMS UPON WHICH ACCOUNT IS GRANTED:

All accounts shall be prepaid unless charge allocations have been established beforehand with credit department.
All payments for goods or services sold pursuant to this application are to be made at the location of the credit, as described in the first paragraph of this application. Said payments are deemed to be performance of the applicant.
I/We agree that should it be necessary for the creditor to instigate any legal proceedings for the collection of any balance due under this account, that the action shall be brought and tried in the Judicial District wherein payments are to be made, and that I/we agree that the court may award reasonable attorney's fees and costs of suit to the prevailing party. By signing this, I/we agree to be held responsible for any debt due for goods/services and for assets supplied by California Tool & Welding Supply.
The above information is given by the applicant for the purpose of obtaining a cash account and is warranted to be true. California Tool & Welding Supply is authorized to investigate all above information pertaining to the applicant's account.

Dated: _____ Signed: _____

Printed Name: _____
Driver's License#: _____

A copy of a photo ID is mandatory with all CASH accounts.

Office use only:

Sales Representative _____
Territory Number _____