

# DESERT INDUSTRIAL GAS

## NORTH LAS VEGAS

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

**For Office Use Only:** Account# \_\_\_\_\_

Approved  Date \_\_\_\_\_

Denied  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 # \_\_\_\_\_

Accounts Payable Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

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

NAME AND ADDRESS OF OFFICERS, PARTNERS OR PROPRIETOR:

NAME	HOME ADDRESS	BIRTHDATE	TELEPHONE

**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.

Office use only:  
 Sales Representative \_\_\_\_\_  
 Territory Number \_\_\_\_\_

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_  
 Driver's License#: \_\_\_\_\_

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

\*\*\*\*\*Rental cylinders cannot be rented by cash accounts unless a valid credit card is on file for rental bill payments. \*\*\*\*\*