

CALIFORNIA TOOL & WELDING SUPPLY

RIVERSIDE • 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) 300-2575
201 N. MAIN ST. Email completed to:
RIVERSIDE, CA 92501 accounting@cal-tool.com

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

Resale # _____ if applicable attach resale certificate for non-taxable status.

Accounts Payable Contact Name: _____ Phone #: _____ Email: _____

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

Cash Accounts are not eligible to rent any equipment or cylinders

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#:** _____

Identification Number if no Driver License is required.

***ID #:** _____

Office use only:

Sales Representative _____

Territory Number _____