

APPLICATION FOR CASH/COD ACCOUNT

THERMAL SUPPLY, INC.

717 S Lander St, Seattle, WA 98134
(206) 624-4590 – FAX (206) 625-9370

Company Name _____ Phone# _____

Street Address _____ Cell# _____

City _____ State _____ Zip Code _____ Fax # _____

Corporation Sole Proprietor Partnership Email Address _____

How Long in Business? _____

If Less than one year, a brief history of your work experience:

EPA Cert # _____ (If applicable, please attach a copy)

Construction Contractors Board # _____ State _____

(required if you are purchasing equipment)

Business License# _____ Drivers License # _____

For States of Washington & Idaho Only: Taxable? Yes No

If not taxable: Please fill our ST101 for the State of Idaho or

Please attach copy of Resale Certificate for the State of Washington

Are you interested in an open account? Yes No

Items you are interested in purchasing from Thermal Supply: _____

We accept MasterCard, Visa, & check cards. Checks only accepted for amount of purchase with check guarantee card or management approval. \$25 service charge for NSF checks.

I understand this application is for information purposes only and does not constitute an application for an open account. Thank you for your time.

_____ Title: _____ Date _____
Signature/Owner or Authorized Agent

Printed Name: _____

06/20/14