

# New Customer Information



Business Name: \_\_\_\_\_

Mailing / Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Shipping Address: \_\_\_\_\_

\_\_\_\_\_ Is this a residence: YES \_\_\_ or NO \_\_\_

Main Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Tax Exempt: YES \_\_\_ or NO \_\_\_ .... If "YES", please fax tax exempt certificate with this form

If you currently own a Power Curber: Model: \_\_\_\_\_ Serial#: \_\_\_\_\_ Year \_\_\_\_\_

## CONTACTS: Please supply name, phone, and email address

Owner / President: \_\_\_\_\_  
\_\_\_\_\_

Concrete Supt. / Operator: \_\_\_\_\_  
\_\_\_\_\_

Service / Equipment Mgr. \_\_\_\_\_  
\_\_\_\_\_

Accounts Payable: \_\_\_\_\_  
\_\_\_\_\_

**If you wish to apply for an open account, review the terms and conditions below, then sign, date and send in the form. Once credit is established, you will receive notification.**

THE ABOVE INFORMATION IS HERewith SUBMITTED FOR THE PURPOSE OF OPENING AN ACCOUNT AND I DO HEREBY CERTIFY THIS INFORMATION TO BE TRUE. THE APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE TO OUR TERMS (net 30 on Parts, Machines payable on receipt & special terms on Molds); AND AGREES TO PAYMENT OF SERVICE CHARGE WHEN TERMS ARE NOT MET.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

***If you choose to NOT apply for an open account, payment terms for future parts orders will be COD, prepay or credit card.***

***Send completed form to Chris Earnhardt, Fax: 704-603-1920, [cearnhardt@powercurbers.com](mailto:cearnhardt@powercurbers.com)***

***Internal use only... distribute forms to: Data entry \_\_\_ ; Accounting \_\_\_ ; Parts \_\_\_***