



NEW CUSTOMER & CREDIT APPLICATION

By submitting this application, you authorize Relevant Solutions/Precision Fitting & Gauge (a Relevant Company) to make inquiries to the bank/trade references supplied.

**TERMS WILL BE CREDIT CARD UNTIL CREDIT APPLICATION IS SUBMITTED AND CREDIT IS APPROVED.
CUSTOMER WILL DEFAULT TO TAXABLE UNLESS A VALID TAX CERTIFICATE IS ATTACHED.
SEND COMPLETED FORM TO CREDITAPPLICATION@RELEVANTSOLUTIONS.COM.**

Section 1: CUSTOMER NAME

Legal Name: _____

DBA: _____

FEIN: _____

DUNS: _____

INITIAL ORDER TOTAL: _____

Agree to 1%10 Net 30:

Section 2: CUSTOMER INFORMATION

SHIPPING ADDRESS:

STREET:

CITY, STATE, ZIP:

PHONE:

WEBSITE:

YEAR ESTABLISHED:

TYPE OF BUSINESS:

NUMBER OF EMPLOYEES:

NAICS CODE (6 DIGIT):

TYPE OF ENTITY:

BILLING ADDRESS:

STREET:

CITY, STATE, ZIP:

PHONE:

SHIP METHOD:

COLLECT ACCOUNT NUMBER IF APPLICABLE:

SALES TAX EXEMPT:

TAX EXEMPTION NUMBER IF APPLICABLE:

PLEASE ATTACH SALES TAX EXEMPTION FORM.

Section 3: CUSTOMER CONTACTS

ACCOUNT PAYABLE NAME:

EMAIL:

PHONE:

PURCHASING:

EMAIL:

PHONE:

OTHER:

EMAIL:

PHONE:

EMAIL ADDRESS FOR SUBMITTING INVOICES:

EMAIL ADDRESS FOR INQUIRIES:

EMAIL ADDRESS FOR STATEMENTS:

EMAIL ADDRESS FOR PORTAL INFORMATION:

Section 4: TRADE REFERENCES

1. NAME			EMAIL		
STREET	STREET 2	CITY	STATE	ZIP CODE	PHONE
2. NAME			EMAIL		
STREET	STREET 2	CITY	STATE	ZIP CODE	PHONE
3. NAME			EMAIL		
STREET	STREET 2	CITY	STATE	ZIP CODE	PHONE

PLEASE PRINT AND SIGN BELOW.

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

RELEVANT SOLUTIONS USE ONLY:

Date:

P21 Customer ID:

Set Up By:

Customer Type:

Customer Class:

Requestor:

Credit Limit:

Credit Terms:

Assigned Sales Rep

Notes: