

## 14400 Bergen Blvd Noblesville, IN 46060

Ph:800-743-5637 Fax: (317) 773-9082

TollFree: 800-743-5637 www.helmerinc.com Ne

New Customer

Account update

Account no:

Sister account

\*\*\*\* SERVICE ACCOUNTS ARE ESTABLISHED AS CREDIT CARD ACCOUNTS \*\*\*\*

Complete page 2 if you are applying for credit (terms)

\*\*\*Failure to complete this form could result in shipment delay of your order\*\*\*

	CRE	EDIT APPLICATION	ON/ NEW CUSTOMER INFO	DRMAT	TION FORM
Applying for credit (Terms	) Yes:	No:	Applicatio D&B NU		
Legal Name:					EIN#:
Trade Name:			·		Year Established:
Bill to Address:	(ADDRESS)			Phone:	
		(CITY / PROVIN	ICE)	Fax:	
		( POSTAL COE	)E)	E-mail:	
		·			
Type of Business: Organization:	_	☐ Service ☐ Whole	esale	r:	
Are you a registered Minority O	wned, VOSB o	r SDVOSB entity?	Yes No ***I	f Yes, subr	nit your Company's Certification Letter and the Contract
Tax exempt	□ Yes □	No **If yes, an ex	emption form is required for all loc	ations***	Award with your PO***
Primary Principal:		(NAME)	A/P Contact:		(NAME)
		(TITLE)			(PHONE)
		(EMAIL)			(FRONE)
		(PHONE)	Invoice Submission F	ortal:	(PORTAL INSTRUCTIONS)
Purchasing Contact:			Ship to Address:		
Ü		(NAME)			( BUSINESS NAME)
		(TITLE)			(ADDRESS)
		(EMAIL)			(CITY) PROVINCE/ POSTAL CODE
Does facility have access to a fork-	-truck or pallet iad	(PHONE)	pment?		(EMAIL)
•	and or panerja		equire a Purchase Order for payment?		
Yes No				<b>.</b>	
Does facility have a loading	dock?	Yes	No -	Ship to	County:
Yes No	(Sh	ould there be multiple	e ship-to addresses, please provid	e all des	tinations, including county of ship-to)
credit reporting agency, gov statements contained in the this application in determin	vernment regi application ar ing its credit	stry, private registry, te true and correct. Ap worthiness. This cont	or civil enforcement agency. The applicant understands that the sellen	pplicant intends aws of th	edit information through any credit bureau, certifies under the penalty of perjury that the to rely on all of the information presented in the State of Indiana. Any litigation concerning within the state of Indiana.
Signa	ture		Name		MM/DD/YY

Page 1 of 2

Last revised date: September 18th, 2018



## 14400 Bergen Blvd Noblesville, IN 46060

Account no:

## Helmer Standard Terms are NET30 unless contracted

	T	rade References		
. Company Name:		2. Company Name:		
Address:		Address:		
Contact Name:		Contact Name:		
hone:		Phone:		
ax:		Fax:		
mail:				
roduct/Service Supplied:				
Annual Purchases:				
. Company Name:		4. BANK INFORMATION		
ddress:	-	Bank Name:		
ontact Name:	-	Address:		
hone:		Account Manager: Account Number: Phone:		
ax:				
mail:				
roduct/Service Supplied:		 Email :		
Annual Purchases:				
or the purposes of this credit tra overnment registry, private registry, orrect. Applicant understands that the onstrued under the laws of the State	nsaction I/We fully consent and authors, or civil enforcement agency. The application in the seller intends to rely on all of the information of Indiana. Any litigation concerning the	for the purpose of obtaining and/or review my company's prize Helmer Inc. to obtain credit information through icant certifies under the penalty of perjury that the stater rmation presented in this application in determining its crisic contract may be commenced, at the sole discretion of critical Colons VISIT OUR WEBSITE AT www.helm	gh any credit bureau, credit reporting ages ments contained in the application are true redit worthiness. This contract shall be redit grantor, in any local, state or federal co	
PRINCIPAL'S SIGN		FULL NAME mer's Office Use Only:	MM/DD/YY	
Credit Approved:	☐ Yes ☐ No	•		
Credit Approved.		Credit Limit \$		
On hold to monitor?:		Net Terms:		
Comments:				
Authorized		Date:		
			(DD/MM/YYYY)	