



Customer Information Sheet

Company name: \_\_\_\_\_ Contact Name: \_\_\_\_\_
Address: \_\_\_\_\_ Phone:( \_\_\_\_\_ )
City,ST,Zip: \_\_\_\_\_ Fax: ( \_\_\_\_\_ )
Shipping Address: \_\_\_\_\_ Cell: ( \_\_\_\_\_ )
City,ST,Zip: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_
Low Voltage License # \_\_\_\_\_ Business Established: \_\_\_\_\_
Electrical License # \_\_\_\_\_ Federal TIN: \_\_\_\_\_

What is your companies main business? \_\_\_\_\_
Purchase order numbers required? [ ] YES [ ] NO
Do you wish tax to be charged on tools? [ ] YES [ ] NO
Do you prefer your invoices/statements to [ ] E-MAILED? OR [ ] FAXED?
Is your shipping address residential? [ ] YES [ ] NO

Officers/Owners/Installers

Name: \_\_\_\_\_ Title: \_\_\_\_\_
Name: \_\_\_\_\_ Title: \_\_\_\_\_
Name: \_\_\_\_\_ Title: \_\_\_\_\_
Name: \_\_\_\_\_ Title: \_\_\_\_\_

Current Products Used

Manufacturer \_\_\_\_\_ Distributor \_\_\_\_\_
Manufacturer \_\_\_\_\_ Distributor \_\_\_\_\_
Manufacturer \_\_\_\_\_ Distributor \_\_\_\_\_

THIS IS NOT AN APPLICATION FOR A NET 30 ACCOUNT

Group One Terms & Conditions

- Stock items may be returned within 30 days in new condition for a 5% restock fee. Restock fee will be waived for credit on account.
• Special orders are not returnable.
• There is a \$ 35.00 charge for returned checks.
• NSF checks will cause your account to be put on a cash basis.

I certify the above information is accurate and that I have read and understood the above terms and conditions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

12031 NE Northup Way, Suite 100, Bellevue, WA 98005
425-454-9900 Fax: 425-454-5902
E-mail Sales@grouponenw.com