

Serving Central and Northern California since 1958

UNLESS SPECIFIC ARRANGEMENTS ARE MADE IN ADVANCE, THESE CONDITIONS APPLY TO ALL ACCOUNTS.

Name:

Title:

CORRESPONDENCE

P.O. Box 12024 Fresno, CA 93776-2024 800.331.4766

EMAIL: creditapp@valleyiron.com - c	or - FAX: Credit De	pt » 559.441.1961		www.valleyiron.com		
Full Company Name:		Tel:		O Individual		
Type of Business:	Date Est:	Fax:		PartnershipCorporation		
Contractor's License #		Email:		O LLC		
Mailing Address:		Have you ever file	ed for bankruptcy?	Y ON		
		If yes, date:				
		Names of Princip	pal(s)			
		Include SS#, hom	ne address, phone:			
Shipping Address:						
Bank Name & Branch:		Account #				
Trade References (current suppliers): 3	nt least 3					
Name:	Address:			Phone & Email Address:		
O Durch and Order Number Described		A a a count Chature	O Tavahla (2 Decel		
O Purchase Order Numbers Required		Account Status:		Resale		
Anticipated Monthly Credit \$		State Resale Permit #				
Attach a completed and signed Ag Exemp	otion Form	Attach a complet	ted and signed Resale	Certificate		
ERMS: NET 30 DAYS FROM DATE OF INVOICE. Invoices will II charges and/or credits for the previous 30 days.	be e-mailed, faxed or mailed	d. Statements will be e-ma	ailed, faxed or mailed on the fi	rst of each month and will reflec		
AST DUE INVOICES will be subject to a finance charge not nance charges become part of the balance due VALLEY If lus all attorney fees and/or collection charges.	to exceed the maximum leg RON INC. Should it become	al rate. Finance charges necessary to place this a	will appear on the monthly staccount for collection, I/we ag	atement and I/we agree that th ree to pay the account balanc		
We certify that the information provided is true and corre onnection with this application. Merchandise is not return	ct, and hereby authorize an able unless approved by So	y person or institution to eller. An emailed/faxed o	o furnish VALLEY IRON INC. wi	th any information requested i will be considered the origina		

Signature:

Date: