



**Billing Data:**

Name of firm \_\_\_\_\_

Billing address \_\_\_\_\_

Billing contact name \_\_\_\_\_

Phone number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Are you purchasing for resale? \_\_\_ No \_\_\_ Yes (If yes, attach resale certificate); If applicable, attach tax exemption certificate.

**Application Information:**

Owned by: \_\_\_\_\_

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

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

Duns # \_\_\_\_\_

Number of years in business \_\_\_\_\_

Bank References (Acct. #'s must be provided to obtain bank data.)	
Bank name _____	
Bank address _____	
Phone number (_____) _____ - _____	Bank contact name _____
Checking account number _____	
Savings account number _____	
Loan account number _____	

**Trade References** (provide fax number for a quicker response)

Company name	Address	Phone (P) or Fax (F) #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

**TERACAI's payment terms are net 30. A Finance charge of 1.5% per month will be added after 30 Days.**

**Signature authorizes TERACAI to contact references.**

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name (print) \_\_\_\_\_ Date \_\_\_\_\_