

For Office Use Only:

Date Opened: \_\_\_\_\_

Account No: \_\_\_\_\_ Cr Lt: \_\_\_\_\_

Taxable: Yes No State: \_\_\_\_\_ City Code: \_\_\_\_\_

Salesman Name/ No: \_\_\_\_\_ Terms: \_\_\_\_\_

Order Pending \_\_\_\_\_ No \_\_\_\_\_ Yes in the amount of \_\_\_\_\_

Comments: \_\_\_\_\_

### Wholesale Industrial Electronics

515 East Bay Street  
Charleston SC 29403

P.O. Box 20367  
Charleston SC 29413-0367

(843) 722-2634  
(843) 723-8182 Fax

WWW.WIEINC.COM

We are a member of Edge Marketing and Procurement

#### GENERAL INFORMATION

Legal name of Firm: \_\_\_\_\_ Trade Name (dba): \_\_\_\_\_

Billing Address: \_\_\_\_\_ Shipping Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Web-Site: \_\_\_\_\_

Corporation  Proprietorship  Partnership  Other: \_\_\_\_\_

Inc. in the State of: \_\_\_\_\_ Years in Business \_\_\_\_\_ Federal ID #: \_\_\_\_\_

D&B# \_\_\_\_\_ Has firm ever filed for bankruptcy: \_\_\_\_\_ (Y/N) If yes, please attach explanation

#### TRADE REFERENCE INFORMATION

1. Co. \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Account No \_\_\_\_\_

2. Co \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Account No \_\_\_\_\_

3. Co \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Account No \_\_\_\_\_

#### BANK REFERENCE

Bank Name: \_\_\_\_\_ Address: \_\_\_\_\_ City/St/Zip \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Account(s): \_\_\_\_\_ Account Number: \_\_\_\_\_

#### REQUESTED DOCUMENTS

Tax Exempt?  Yes  No If Yes, a sales tax exemption or resale certificate must be sent with application for processing or sales tax will be charged if applicable.

#### AGREEMENT ACKNOWLEDGMENT

Applicant's signature attests ability and willingness to pay Wholesale Industrial Electronics, Inc. invoices in accordance with the following terms and conditions:

1. Payment in full within Wholesale Industrial Electronics, Inc. terms as stated on the invoices.
2. All information given is for the purpose of obtaining credit and is warranted to be true.
3. I/We hereby authorize Wholesale Industrial Electronics, Inc.'s agents and employees, to investigate the references listed pertaining to our credit

Company Name: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

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