



PLEASE COMPLETE THIS CREDIT APPLICATION TO ESTABLISH AN ACCOUNT WITH WAL-RICH CORPORATION. YOUR ASSISTANCE IN PROVIDING US WITH COMPLETE INFORMATION WILL ENSURE THAT YOUR ORDER IS SHIPPED PROMPTLY. THE WAL-RICH TEAM THANKS YOU FOR YOUR ORDER!

YOUR COMPANY INFORMATION

COMPANY NAME: _____

SHIPPING ADDRESS: _____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

PURCHASING CONTACT: _____ A/P CONTACT: _____

EMAIL ADDRESS: _____

STATE RESALE # _____

TRADE REFERENCES

COMPANY NAME: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ PHONE: _____ FAX: _____	COMPANY NAME: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ PHONE: _____ FAX: _____
COMPANY NAME: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ PHONE: _____ FAX: _____	COMPANY NAME: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ PHONE: _____ FAX: _____

BANK REFERENCE

BANK NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

SHIPPING INSTRUCTIONS

PENDING CREDIT APPROVAL, SHIP THIS ORDER ASAP VIA CREDIT CARD

INSTRUCTIONS: _____

We certify that all the information on this form is correct, and fully understand Wal-Rich's credit terms. We agree to proper payment in consideration of extended credit.

Authorized Signature (required) _____ Title _____

Print Name _____ Date _____