

# APPLICATION FOR OPEN ACCOUNT

**CORPORATE OFFICE**  
WAUKESHA-PEARCE INDUSTRIES, INC.  
P. O. Box 35068  
Houston, Texas 77235-5068  
ATTN: Credit Department

Telephone (713) 723-1050  
Fax (713) 551-0435

**DISTRICT OFFICE**  
WAUKESHA-PEARCE INDUSTRIES, INC.  
 RUSH ORDER  Yes  No

***Failure to submit information in boxed areas (front & back) may result in immediate decline of application.***

Company Name ("Applicant"):	Stock Symbol:	Stock Exchange:	
State of Incorporation:	Year Incorporated:	Affiliates (If Any):	
Nature of Business (Industry):	Federal Id#:	State Id#:	
Headquarter Address:	City:	State:	Zip:
Mailing Address:	City:	State:	Zip:
Address for WPI Service Request:	City:	State:	Zip:
Primary Contact Name:	Telephone Number:	Fax Number:	
Primary Contact Email Address:			
Accts Payable Contact Name:	A/P Contact Telephone #:	A/P Contact Fax #:	
A/P Contact Email Address:			
Principals:			
Authorized Signor #1 for Company:	Authorized Signor #2 for Company (if any):		
Authorized Signor #1 Signature:	Authorized Signor #2 Signature (if any):		
Business Classification:	<input type="checkbox"/> User ( ) <input type="checkbox"/> Resale ( )		
Exemption Certificate Attached	Yes ( ) No ( )	Number _____	
Purchase Order Required	Yes ( ) No ( )	Authorized Signature(S) On P.O. _____	

**Special Company Requirements for Service:**

**WPI'S STANDARD TERMS ARE NET 30 DAYS FROM INVOICE DATE EXCEPT RENTAL AND UNIT SALES ARE DUE UPON RECEIPT OF INVOICE.**

Our Credit Department will establish a credit limit covering your monthly purchases based on credit information that you are furnishing. Purchases in any one month in excess of established credit limit will require credit authorization from our Credit Department in Houston. Credit Department authorization will also be required any time account becomes delinquent. All charges are payable at P. O. Box 204116, Dallas, Texas 75320-4116.

A SERVICE CHARGE NOT TO EXCEED THE LEGAL RATE PRESCRIBED BY STATE LAW WILL BE CHARGED WHEN ACCOUNTS EXCEED OUR STANDARD TERMS OF SALE. THIS RATE WILL NOT BE LESS THAN ONE PERCENT (1%) OF THE BALANCE DUE FOR EACH 30-DAY PERIOD OF DELINQUENCY.

I authorize Waukesha-Pearce Industries, Inc. ("WPI"), to notify any general contractor owner, bond company or other involved party in the extension of credit to me involved for the purpose listed. This notification may occur before, during or after the credit is extended. This authorization is given to aid in determining whether and under what terms to extend credit to me from Waukesha-Pearce Industries, Inc.

Accepted Invoices. As to invoices accepted, or to which timely objection is not made as required, it shall be presumed: that the invoice is accurate, that the goods or services referenced on the invoice were ordered by applicant; that the goods or services were received by applicant; that the prices charged are agreed and reasonable prices; that the invoice total is payable to WPI; that applicant agrees to pay the invoices within 30 days of invoice date.

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

Applicant (Printed Name): \_\_\_\_\_

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

Title

**BOND AND CONTRACTOR FORM**

**1. SUB-CONTRACTOR Purchaser)** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE AND ZIP: \_\_\_\_\_

PHONE NO : \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

**2. GENERAL CONTRACTOR:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE AND CONTACT NAME \_\_\_\_\_

**3. PROJECT NAME:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

QUOTE AMOUNT: \_\_\_\_\_

**4. OWNERS OF PROJECT:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

**5. BOND COMPANY** \_\_\_\_\_

BOND #: \_\_\_\_\_

LOCAL INSURANCE BROKER/BOND AGENT \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE NO: \_\_\_\_\_