

This is a printable version of the Halsted & Hoggan, Inc. credit application.

Please print it out and fax it to 213-623-5527.

Company Name:	DBA:
Description of Business:	Year Established:
Tax Status: Taxable/Resale/Exempt	Type of Business: Corporation/Partnership/Individual
Billing Address:	Shipping Address:
Billing City/State/Zip	Shipping City/State/Zip
Telephone:	Fax:
URL Address:	Email:
Accounting Contact/Extension:	Sales Contact/Extension:
Business Checking Bank:	Branch/Telephone:
Business Checking Account#:	Bank Contact:

Terms: Net thirty (30) days from date of invoice. A two percent (2%) service charge is charged per month on all past due invoices. Applicant agrees to pay all charges for account or others using this account regardless of its credit limit.
Applicant will pay all collection costs including attorney's fees.

REFERENCES

Only vendors that have your company on open account/ 3 references minimum

Company Name:	Phone:	Contact Person:
Address:	Fax:	Account #:
Company Name:	Phone:	Contact Person:
Address:	Fax:	Account #:

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Address:	Fax:	Account #:

If your purchases are for resale please complete the following:

RESALE CERTIFICATE

The undersigned hereby certifies that all PUMPS, SERVICE PARTS, PUMP ACCESSORIES, WINDMILL, WELL SUPPLIES AND ACCESSORIES and/or MOTORS hereafter purchased is/are for the purposes of resale, and assumes all liability for the payments required by Sales and Use Tax Law with respect to receipts from the resale of the purchased property. Unless otherwise specified this certificate shall be considered a part of each verbal or written purchase order placed with Halsted & Hoggan, Inc. 935 S. Santa Fe Ave. Los Angeles, CA 90021.

Valid Seller's Permit No.: _____

Signature: _____ Title: _____

Name of Purchaser: _____

Mailing Address of Purchaser: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-Mail: _____ Web Address: _____