



Phoenix Wire and Cable, Corp

1255 BUFORD HIGHWAY, SUITE 202

SUWANEE, GA 30024

PHONE: (770) 904 4135

FAX: (770) 904 4139

ACCOUNT APPLICATION

NAME OF COMPANY: _____

STREET ADDRESS: _____

BILLING ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE NUMBER: _____

FAX NUMBER: _____

TYPE OF BUSINESS: _____

YEARS IN BUSINESS: _____

CORPORATION

PARTNERSHIP

INDIVIDUAL

OTHER

OFFICERS: NAME: _____

TITLE: _____

NAME: _____

TITLE: _____

ACCOUNTS PAYABLE CONTACT: _____

FEDERAL ID#: _____

SALES TAX #: _____

DUNS #: _____

BANK REFERENCE: NAME: _____

CONTACT: _____

ADDRESS _____

PHONE NUMBER: _____

FAX NUMBER: _____

ACCOUNT NUMBER: _____

TRADE REFERENCES: (SUPPLY NAME, ADDRESS, PHONE , FAX AND CONTACT) _____

1. _____

2. _____

3. _____

I hereby authorize Phoenix Wire and Cable Corp. to investigate the references listed above pertaining to credit and financial responsibility. The applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with our payment terms.

AUTHORIZED SIGNATURE: _____

TITLE: _____

DATE: _____

PRINT NAME: _____