



NEW CUSTOMER & CREDIT APPLICATION

By submitting this application, you authorize Building Controls & Solutions to make inquiries to the bank/trade references supplied.

**TERMS WILL BE CREDIT CARD UNTIL CREDIT APPLICATION IS SUBMITTED AND CREDIT IS APPROVED.
CUSTOMER WILL DEFAULT TO TAXABLE UNLESS A VALID TAX CERTIFICATE IS ATTACHED.
SEND COMPLETED FORM TO: AR@Building-Controls.com**

Section 1: CUSTOMER NAME					
Legal Name: _____					
DBA: _____		INITIAL ORDER TOTAL: _____			
FEIN: _____					
DUNS: _____					
Section 2: CUSTOMER INFORMATION					
SHIPPING ADDRESS: STREET: CITY, STATE, ZIP: PHONE:			BILLING ADDRESS: STREET: CITY, STATE, ZIP: PHONE:		
WEBSITE: YEAR ESTABLISHED: TYPE OF BUSINESS: NUMBER OF EMPLOYEES: NAICS CODE (6 DIGIT): TYPE OF ENTITY: CORPORATION / LLC / PARTNERSHIP / INDIVIDUAL			SHIP METHOD: PP&A / COLLECT COLLECT ACCOUNT NUMBER IF APPLICABLE: SALES TAX EXEMPT: YES / NO TAX EXEMPTION NUMBER IF APPLICABLE: PLEASE ATTACH SALES TAX EXEMPTION FORM.		
Section 3: CUSTOMER CONTACTS					
ACCOUNT PAYABLE NAME:		EMAIL:		PHONE:	
PURCHASING:		EMAIL:		PHONE:	
OTHER:		EMAIL:		PHONE:	
EMAIL ADDRESS FOR SUBMITTING INVOICES:			EMAIL ADDRESS FOR INQUIRIES:		
EMAIL ADDRESS FOR STATEMENTS:			EMAIL ADDRESS FOR PORTAL INFORMATION:		
Section 4: TRADE REFERENCES					
1. NAME			EMAIL		
STREET	CITY	STATE	ZIP CODE	PHONE	
2. NAME			EMAIL		
STREET	CITY	STATE	ZIP CODE	PHONE	
3. NAME			EMAIL		
STREET	CITY	STATE	ZIP CODE	PHONE	

PLEASE PRINT AND SIGN BELOW.

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

INTERNAL USE ONLY:

Date: _____

P21 Customer ID: _____

Set Up By: _____

Customer Type: _____

Customer Class: _____

Requestor: _____

Credit Limit: _____

Credit Terms: _____

Pricing Library: _____

Notes: _____