

Window

Center

SUPERIOR, MILGARD & ATRIUM Distributor"

430 E Alondra Blvd Gardena, CA 90248

Tel.310.715.8415 Fax.310.715.8625

Window-Center.com



New Account Application

Date / /	<input type="checkbox"/> New Account	<input type="checkbox"/> Update Account	<input type="checkbox"/> COD
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Business Information

Business Name:	Phone #: ()
Address:	Fax #: ()
City, State, Zipcode:	

Owner Information

Owners Name:	Phone #: ()
Address:	Fax #: ()
City, State, Zipcode:	Contact:
Drivers License #:	
Social Security #:	
State Cont Lic #	

Bank Information

Bank Name:	Phone #: ()
Address:	Fax #: ()
City, State, Zipcode:	Contact:
Account #:	

Trade References - Minimum 3 (Open Accounts Only)

Name:	Name:
Address:	Address:
City, State, Zipcode:	City, State, Zipcode:
Phone #:	Phone #:
Fax #:	Fax #:
Contact:	Contact:
Name:	Name:
Address:	Address:
City, State, Zipcode:	City, State, Zipcode:
Phone #:	Phone #:
Fax #:	Fax #:
Contact:	Contact:

How did you find out about us? Sales call Advertising Internet Friend Other

AGREEMENT: Signature below authorizes bank to release credit information

The information and statements in this application are TRUE AND COMPLETE, and are made to establish an account / line of credit with the WINDOW CENTER. You are hereby authorized to obtain information you consider necessary from any source concerning the statements in this application. I (we) hereby agree to pay all invoices in accordance with the terms so stated on such invoices. By signing this application, I (we) hereby agree to abide by the WINDOW CENTERS credit terms and conditions.

Signature of Owner / Officer	Title	Date / /
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Attach copy of Contractors License and Drivers License to application