



Commercial/Industrial Account Application

Benefits of opening an account:

- * Bulk pricing **discount** plan tailored to your account.
- * **Your choice** to have invoice copies emailed at time of purchase.
 - * Purchase history captured for future discounts and re-buys.
 - * Online invoice/statement viewing
 - * Electronic statements emailed monthly

Thank you for your interest in opening a
Commercial/Industrial Account with us.
Please return application to Rene Duran's attention at:

Cheyenne Ace Hardware


3575 E Lincolnway
Cheyenne, WY 82001
Phone: 307-514-0009

www.acehardwarecheyenne.com
www.facebook.com/acehardwarecheyenne

Commercial Account Contact:
Tillie Duran

Account Specialists:

Rene Duran rene@acehardwarelaramie.com
Cheryl Medina cheryl@acehardwarelaramie.com





Cheyenne Ace Hardware
3505 E. Lincolnway
Cheyenne, WY 82001
Phone: (307) 514-0009

Company Name: _____ Assigned Account # (office use only): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Business Type: _____ Contractor _____ Distribution/Warehouse
choose one _____ Manufacture _____ Municipality/Government
_____ Service _____ Property Management
_____ Other: _____

PURCHASING Contact: _____ **Email:** _____

Tax Exempt: Yes or No _____ Government/Resale/Charitable or Church _____

State Sales Tax ID Number or FED ID #: _____

Credit Terms:

- I. All statements are due the 10th of each month. All accounts are set up as NET 30
 - A. All statements must be paid within 30 days or the account will be placed on hold.
 - B. If account is not paid in 60 days, it will be turned over for collection and closed.
 - C. Billing cycle runs from the FIRST to the END OF MONTH.
- II. A 1 3/4% finance charge of \$1.75 minimum charge will be charged to all invoices over 30 days old.
- III. Customer will pay all court costs, attorney's fees, and/or collection fees and costs in order to collect past due accounts.

I certify that all the information on this form is correct and that I have read and understand the credit terms as outlined. I agree as a representative of the applicant to the proper payment in consideration of extended credit.

ACCOUNTING Contact: _____		Email: _____	
Phone: _____		Fax: _____	
<input type="checkbox"/> I would like to set up an online account to view my invoices/statements at acehardwarelaramie.com (user name & password provided by office)			
<input type="checkbox"/> Please email (invoice copies / monthly statements) to: _____			
<input type="checkbox"/> I am a current Ace Rewards Member: # _____			
Authorized Signature: _____		Title: _____	
		Date: _____	

***Please complete reverse side of this form**



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PLEASE ATTACH 3 BUSINESS REFERENCES & BANK INFORMATION.

All References **MUST** include:

- Business Name
- Complete Address
- Phone Number
- Fax Number
- Email Address

Do you require a Purchase Order/Job Description/Job Location? YES _____ NO _____

First & Last Names of Authorized Purchasers:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____