



1950 N. Mannheim Road  
Melrose Park IL 60160

Fillable E-Form

Today's Date:

Customer Information/Application for Credit Terms				
Legal Entity Name:		Bristol Customer ID#:		
DBA Name:		Phone:	Fax:	
Billing Address:		City:	State:	Zip:
Ship to Address: <i>(If different than the Billing Address)</i>		City:	State:	Zip:
Business Entity Type: <i>(Corp/Sole Proprietorship/LLC, Etc.):</i>	Line of Business:			
	Year Business Started:			
CEO/Principal:		Parent Company <i>(if any):</i>		
A/P Contact Name:		Email:		
A/P Contact Title:		Phone:	Fax:	
Terms Requested: <i>(if applicable)</i>		Credit Line Requested (USD\$):		
Preference receiving invoices/statements	Email	Fax	Mail	<b><u>If non-taxable, please email your business Exemption or Resale Certificate to ar@bristolhose.com</u></b>
Taxable Purchases?	Yes	No		
Tax ID #:				
Check if PO# required		Credit References		
Please provide at least <b>three</b> vendors within the U.S. that we might contact whom you have comparable lines of credit. <i>Please be advised we must have these references to process your application. Providing incorrect or incomplete reference information will result in processing delays and/or denial of terms.</i>				
Name:		Name:		
Address:		Address:		
City, State, Zip:		City, State, Zip:		
Contact:		Contact:		
Email:		Email:		
Phone:		Phone:		
Name:		Name:		
Address:		Address:		
City, State, Zip:		City, State, Zip:		
Contact:		Contact:		
Email:		Email:		
Phone:		Phone:		

Requested By  
(Name):

Signature:

Please COMPLETE, PRINT and SEND form to [ar@bristolhose.com](mailto:ar@bristolhose.com) or Fax Number (708)492-0261.

All information provided will be held in strict confidence.