



INTERNET
 NETWORKING
 LAND MOBILE RADIO
 VOICE & DATA
 SURVEILLANCE & SECURITY
 ACCESS CONTROL
 FIRE LIFE SAFETY

Customer Account Information Form

DATE: _____ * CREDIT LINE DESIRED: _____

COMPANY NAME: _____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

SHIPPING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ FAX: _____

ACCOUNTS PAYABLE CONTACT: _____

A/P TELEPHONE: _____ A/P FAX: _____ A/P EMAIL: _____

DATE BUSINESS ESTABLISHED: _____

PROPRIETORSHIP: _____ PARTNERSHIP: _____ CORPORATION: _____

PRINCIPAL/OWNERS: NAME: _____ SS#: _____

NAME: _____ SS#: _____

FEDERAL TAX ID #: _____

SALES TAX EXEMPTION # (WY FORM REQUIRED): _____

TRADE/SUPPLIER/VENDOR REFERENCES:

	NAME	CITY & STATE	TELEPHONE	FAX
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

BANK REFERENCE:

BANK/BRANCH: _____ BANK OFFICER: _____

ACCOUNT IN THE NAME OF: _____ TELEPHONE: _____

CHECKING ___ SAVINGS ___ LOAN ___ ACCOUNT #: _____

We represent that neither the above applicant nor the undersigned has ceased to pay its debts in the ordinary course of business affairs, that it can pay its debt when they become due, and that it is solvent within the meaning of U.S. Bankruptcy Codes. Should invoices on the account become past due, we agree to pay the 1-1/2 % charge or the maximum allowed by law until the invoices are paid (whichever is greater). In the event of suit to collect unpaid balances, the undersigned debtor shall pay all cost, including reasonable attorney's fees, whether for negotiation, trial of appellate work, and we each acknowledge and agree that suit may be instituted in Campbell County, Wyoming. Buyer assumes full responsibility for payment of all materials ordered, fabricated, or shipped. If any part of this agreement proves to be invalid by Federal or State Laws, all other parts of this agreement remain in force. Applicant's signature attests financial responsibility, ability and willingness to pay our invoices according to terms. The undersigned understands that the following information is being submitted for the purpose of obtaining credit from Collins Communications, Inc., and authorizes the investigation of this information through banks and references cited herein.

DATE: _____ SIGNATURE: _____ TITLE: _____

DATE: _____ SIGNATURE: _____ TITLE: _____

COLLINS ACCOUNT NUMBER: _____

