

**KOWALLIS AND RICHARDS, INC.**  
 Hardware and Industrial Supplies  
 1000 W. Amity Road - Boise, Idaho 83705  
 Phone: 208-342-2677 Fax: 208-342-2121

**CUSTOMER INFORMATION and/or CREDIT APPLICATION**

Company Name: \_\_\_\_\_ DBA: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Shipping Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Business:  Corporation  LLC  Partnership  Individual  Govt. Are you tax exempt? Yes  No   
 Wholesale  Retail  Manufacturing  Non-Profit (If "yes", a signed certificate is required.)

Year business established: \_\_\_\_\_ Nature/products of the business: \_\_\_\_\_

**OWNERSHIP and/or OFFICERS:**

NAME	TITLE	MAILING ADDRESS	PHONE & Ext. #	BUSINESS EMAIL
1.				
2.				
3.				

**PURCHASING** -Are purchase orders required? Yes  No

**AUTHORIZED PURCHASING / BUYERS' CONTACT INFORMATION:**

NAME	TITLE	BUSINESS MAILING ADDRESS & FAX	PHONE & Ext. #	BUSINESS EMAIL
1.				
		FAX:		
2.				
		FAX:		

**ACCOUNTS PAYABLE** - How do you wish to receive your invoices? Faxed  Mailed  Email

**ACCOUNTS PAYABLE CONTACT INFORMATION:**

NAME	TITLE	BUSINESS MAILING ADDRESS & FAX	PHONE & Ext. #	BUSINESS EMAIL
1.				
		FAX:		
2.				
		FAX:		

**CREDIT APPLICATION INFORMATION**

**BUSINESS/TRADE REFERENCES:**

BUSINESS NAME	ADDRESS	PERSON TO CONTACT	PHONE & Ext. #	BUSINESS EMAIL
1.				
2.				
3.				

**BANK REFERENCES:**

BANK NAME	ADDRESS	PERSON TO CONTACT	PHONE & Ext. #	ACCOUNT NUMBER
1.				
2.				

**KOWALLIS and RICHARDS, INC.  
CREDIT TERMS and CONDITIONS**

Terms of payment are NET 30 days from the date of the invoice. On invoices remaining unpaid after 60 days, a service charge of 1.5% (18% per annum) will be billed to the account. The Customer agrees to pay any and all costs, including reasonable attorneys’ fees incurred by Kowallis and Richards, Inc. to secure payment of any past due amounts. The Customer agrees to pay any and all costs of any checks that are returned for insufficient funds or closed bank accounts.

The Customer authorizes a Kowallis and Richards, Inc. representative to investigate all business information, business & trade references, and bank references furnished by the applicant (or any other person) concerning the Applicant and/or Customer’s credit background and responsibility.

The Customer must notify Kowallis and Richards, Inc. in writing of any changes to the account including owners, officers, authorized buyers, and accounts payable contacts.

The undersigned certifies that he/she has the authority to apply for this account and commit the above named account to the liabilities resulting from trade conducted between the above names account (the Customer) and Kowallis and Richards, Inc., also that he/she has read and understands all contained herein, and that the information provided on this form is true and factual.

OWNER/OFFICER (please print): \_\_\_\_\_

TITLE: \_\_\_\_\_

OWNER/OFFICER signature: \_\_\_\_\_

DATE: \_\_\_\_\_