



UNITED PACIFIC INDUSTRIES INC.
3788 E. Conant St.
Long Beach, CA 90808
Tel: (800) 790-6988
Fax: (888) 986-5988
www.upauto.com

Thank you for your interest in United Pacific Industries, Inc.

Attached is our new customer credit application package. Please fill out the following forms and return by email, fax or mail.

- New Customer Info/Credit Form
- California Resale Certificate (If Applicable)
- Account Authorization Form
- Additional Account Information

Our contact information is as follows

United Pacific Industries, Inc.
3788 E. Conant St.
Long Beach, CA 90808
Tel: (562) 421-3888
Fax: (888) 986-5988
Toll Free: (800) 790-6988
Email: nsanchez@upauto.com
Web: www.upauto.com

Please feel free to contact us at anytime.

Sincerely,

United Pacific Industries, Inc



United Pacific

3788 E. Conant St., Long Beach, CA 90808
Tel: (562) 421-3888 / (800) 790-6988
Fax: (888) 986-5988
UPauto.com

New Customer Information & Credit Form

Sales rep: _____

Terms: _____

Name of Firm		Est. Since
Name of Contact	Phone	Fax Number
Mailing Address	City	State / Zip
Shipping Address	City	State / Zip
E-Mail Address	Line of Business	
Corporation	Partnership	Proprietorship
State of Corporation		
Name of Paying Officers, Partners or Principal Owners		
SSN	Federal ID	

Parts Manager & Paying Officer:

Parts Manager Name	Parts Manager Email	
Accounts Payable Name	Accounts Payable Email	Accounts Payable Fax

Bank Affiliation:

Bank Name	Branch Number	Phone
Address	City	State / Zip
Account Number	Normal Balance Maintained	

Trade References:

Company 1	Phone	Fax Number
Mailing Address	City	State / Zip
Company 2	Phone	Fax Number
Mailing Address	City	State / Zip
Company 3	Phone	Fax Number
Mailing Address	City	State / Zip

Authorization to Release Credit Information:

Signature _____

Position _____

Date _____

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Authorization Form

Date: _____

To Whom It May Concern:

I authorize United Pacific Industries, Inc. to obtain a credit rating on

(Your Company Name)

for the sole purpose of obtaining an Open Account.

Name: _____
(Corporate Officer)

Signature: _____

Title: _____



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Additional Account Information

Are Purchase Order Number required on all PO's: YES / NO

Parts Manager Name: _____

Parts Manager Email: _____

Accounts Payable Name: _____

Accounts Payable Fax: _____

Accounts Payable Email: _____