



Date:		Sales Rep:	
Company name:		Number of Years in Business:	
Phone Number:		Fax Number:	
Principals:		Description of Business:	
Purchasing Contact Name:		Purchasing phone/email:	
Accounts Payable Contact Name:		Accounts Payable phone/email:	
Email for invoices & statements:			
* <u>Required</u> : Does your company sell or ship/distribute any product for export outside of the United States or Canada?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Billing Address:		Shipping Address:	
Estimated Yearly Purchases:		Setup for online B2B ordering? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Suppliers (minimum of 4 required)			
Company Name	Address	Phone & Fax Number	Email Address
***** Please attach a copy of your Sales Tax Exemption Certificate *****			
***** Please attach any special shipping instructions *****			
This section to be completed by territory sales rep (see Procedures SP-0002 for chart)			
Customer Class	Code	Sub Class	Description
For Velvac use only			
Warehouse	Price List	Discount List	Prepaid Freight
For credit department use only			
Credit Code	Credit Limit	Signed	Date
Please send completed credit application to accounting@velvac.com or Fax# 262-797-6240			

Form: SF-0007 Customer setup-credit application. Revised 05/27/2020