



1026 LaPointe Street Boise ID 83706

Phone 208.342.3254

Fax 208.342.1531

e-mail: info@howi.com

APPLICATION FOR OPEN ACCOUNT

Company Information:

Name _____ Phone (____) _____ - _____
Mailing Address _____
City _____ State _____ Zip _____ - _____
Alternate Phone (____) _____ - _____ Business Fax (____) _____ - _____
Physical Address _____
City _____ State _____ Zip _____ - _____

Nature Of Business _____ Years In Business _____
_____ Sole Proprietor _____ Partnership _____ Corporation

Are your purchases Sales Tax Exempt? Yes ___ No ___ (If yes sign and attach State Sales Tax Exemption Form ST-101)

Do you require purchase orders? Yes ___ No ___

Purchasing Contact _____ e-mail _____

Accounts Payable Contact _____ e-mail _____

How do you normally pay your suppliers? :
_____ 10th of month following _____ 30days _____ 45days _____ 60days _____ Other (Attach page and Explain)

List Owners/Partners or Officers:

Name _____ Phone (____) _____ - _____

Name _____ Phone (____) _____ - _____

Name _____ Phone (____) _____ - _____

Trade References: (minimum 3-required)

Company Name _____ Phone (____) _____ - _____

Mailing Address _____ Fax (____) _____ - _____

City _____ State _____ Zip _____ - _____

Company Name _____ Phone (____) _____ - _____

Mailing Address _____ Fax (____) _____ - _____

City _____ State _____ Zip _____ - _____

Company Name _____ Phone (____) _____ - _____

Mailing Address _____ Fax (____) _____ - _____

City _____ State _____ Zip _____ - _____

Financial Information:

Bank Name _____ Phone (____) _____ - _____

Mailing Address _____ Fax (____) _____ - _____

City _____ State _____ Zip _____ - _____

Account Number _____ Branch _____

Contact Name _____ Contact Phone (____) _____ - _____

I have made the above statements for the purpose of obtaining credit, and I hereby certify said statements are true. I understand that the terms of sale for goods purchased on open account are as follows: It is agreed that payment will be made no later than thirty (30) days from the date of invoice (NET-30). A service charge of 1 1/2 % per month (18% per annum) will be added on all past due accounts. Signature of principal(s) below signifies guarantee for partnership or corporate indebtedness.

Minimum Charge \$5.00.

Signature _____ Date _____ Title _____