

Company Information

Company Name:

Billing Street Address:

CITY:

ST:

ZIP:

Phone:

Fax:

Company Website:

Billing Email Address:

Tax I.D. Number:

Invoice Method: Fax Email

Legal Form Under Which Business Operates:

Corporation Partnership Proprietorship

If Division/Subsidiary, Name of Parent Company:

Name of Principal Responsible for Business Transactions:

Title:

How long have you been in business?

UL Certifications: UL508A UL698A Other :

Are you currently a FactoryMation Customer?

Yes No

Credit Line Requested (Estimated Monthly Purchases):

Order Pending? Yes No

Estimated First Order Amount:



CALL TOLL-FREE
1.800.972.0436

FAX
770.721.7376

VISIT US ONLINE
factorymation.com

Typical processing time 3 to 5 days.
We gladly accept the alternate forms of payment below.



Primary Shipping Information

Is shipping same as billing? Yes No

Shipping Street Address:

CITY: ST: ZIP:

Phone: Fax:

Authorized Buyers (list personnel authorized to make purchases on FM account)

Name	Title	Phone	Email
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.....
.....
.....
.....
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Accounting Contacts (who do we contact regarding billing/payment inquiries)

Name	Title	Phone	Email
.....
.....
.....

Which type best describes your company?

(check all that apply)

- Contractor Engineering Firm/Consultant OEM System Integrator Other:
 End User Machine Builder Panel Builder Wholesaler/Distributor

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Which of these best describes your company's industry? *(check all that apply)*

Aerospace <input type="checkbox"/>	Control Systems <input type="checkbox"/>	Marine <input type="checkbox"/>	Pipe or Tubing <input type="checkbox"/>	Transportation <input type="checkbox"/>
Agriculture <input type="checkbox"/>	Energy/Power/Utilities <input type="checkbox"/>	Material Handling <input type="checkbox"/>	Plastics <input type="checkbox"/>	Other: _____
Automotive <input type="checkbox"/>	Food/Beverage <input type="checkbox"/>	Metalworking <input type="checkbox"/>	Pulp and Paper <input type="checkbox"/>	_____
Chemical <input type="checkbox"/>	Government/Military <input type="checkbox"/>	Oil and Gas <input type="checkbox"/>	Pump Systems <input type="checkbox"/>	_____
Communications <input type="checkbox"/>	HVAC Systems <input type="checkbox"/>	Packaging <input type="checkbox"/>	School/University <input type="checkbox"/>	_____
Construction <input type="checkbox"/>	Mining <input type="checkbox"/>	Pharmaceutical <input type="checkbox"/>	Textiles <input type="checkbox"/>	_____

Which of the following products are used on a regular basis? *(check all that apply)*

Product Categories	Total Spent	Brand(s)	Suppliers
AC Drives <input type="checkbox"/>	_____	_____	_____
Motor Controls <input type="checkbox"/>	_____	_____	_____
Circuit Protection <input type="checkbox"/>	_____	_____	_____
Temperature Controllers <input type="checkbox"/>	_____	_____	_____
Programmable Controllers <input type="checkbox"/>	_____	_____	_____
Enclosures <input type="checkbox"/>	_____	_____	_____
Pushbuttons & Indicators <input type="checkbox"/>	_____	_____	_____
Stacklights <input type="checkbox"/>	_____	_____	_____
Transformers <input type="checkbox"/>	_____	_____	_____
Relays & Timers <input type="checkbox"/>	_____	_____	_____
Wiring Solutions <input type="checkbox"/>	_____	_____	_____
Motors <input type="checkbox"/>	_____	_____	_____
Sensors <input type="checkbox"/>	_____	_____	_____
Other <input type="checkbox"/>	_____	_____	_____

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Trade References (check one)

AT LEAST 5 REFERENCES REQUIRED

Attached Listed Below

We must get a response from at least 5 trade references that support the requested credit amount before credit can be issued. Additional references may be added to expedite the application process.

Account #	Company Name	Address (including city, state & zip)	Phone	Email or Fax
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I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. We further acknowledge that credit privileges, if granted, may be withdrawn at any time.

Signature: Date:



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