

Hilyard's Business Solutions
1616 Newport Gap Pike
Wilmington, DE 19808
Phone (302) 995-2201 Fax (302) 995-2277

Full Legal Name: _____

Billing Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Billing Email Address: _____

Business Start Date: _____

Description of Business: _____

Please Check One: Corporation Partnership Individual LLC

Federal Tax ID: _____ Dunn & Bradstreet #: _____

Do you require Purchase Orders? Yes No

Bank References:	Acct No.	Telephone	Acct Officer
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1 _____

2 _____

Credit & Trade References:	Contact	Telephone
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1 _____

2 _____

INDICATE BELOW NAMES & TITLES OF OWNERS, OFFICERS AND/OR PERSONS RESPONSIBLE FOR ACCOUNT:

Name	Title	Home Address
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1 _____

2 _____

** If individually owned, a Partnership or a closely held Corporation, please indicate the following:

Name _____ SS# _____ Home Phone _____

Address _____ City _____ State _____ Zip _____

Authorization:

Signature and Title

Date

Billing: Once the account is established, our terms are Net 30 days.