



TULSA, OK

15335 E. Admiral Place
Tulsa, OK 74116
Phone: (918) 437.0010
Fax: (918) 779.6814

OKLAHOMA CITY, OK

15200 NW 34th Street
Yukon, OK 73099
Phone: (405) 440.2000
Fax: (405) 440.9444

FORT SMITH, AR

3806 Mulberry Hwy 64W
Alma, OK 72921
Phone: (479) 997.1111
Fax: (479) 997.1160

LITTLE ROCK, AR

12401 East Eanes Road
North Little Rock, AR 72117
Phone: (501) 945.0600
Fax: (501) 945.0631

TEXARKANA, AR

3105 East 9th Street
Texarkana, AR 71854
Phone: (870) 330.4435
Fax: (870) 330.0906

SILOAM SPRINGS, AR

510 S. LINCOLN
Siloam Springs, AR 72761
Phone: (479) 373.1525
Fax: (479) 373-1526

Customer Account Credit Application for Parts and Service

PLEASE PRINT CLEARLY

Customer Name:		Cust D&B #:	Fed Tax ID or SSN (If Indiv DBA) (REQUIRED)	
Billing Address:		City, State, Zip		
Physical Address:		City, State, Zip		
Contact/Title:	Office Phone:	Cell Phone:	Fax:	Email:
Description of Business: #Trucks _____ #Trailers _____		PO# Required?: <input type="radio"/> Yes <input type="radio"/> No	Pre-Authorization Required Before Work is Started?: <input type="radio"/> Yes <input type="radio"/> No	
Type of Business: () Partnership () Proprietorship () Corporation		State of Incorporation: _____ () Public () Private		Company in Business Since:
Amount of Credit Applied For: \$	Sales/Use Tax Exempt? (REQUIRED) <input type="radio"/> Yes <input type="radio"/> No	Tax Exempt # and copy of Sales Tax Exemption Permit (REQUIRED IF YES)		
Accounts Payable Contact:	Accounts Payable Phone:	E-Mail Address for Accounts Payable (REQUIRED):		

OTHER BRANCHES / LOCATIONS / AFFILIATED BUSINESSES

Location Name:	City:	State:	Contact:	Phone:
Location Name:	City:	State:	Contact:	Phone:

PRINCIPAL OWNER / PARTNERS / OFFICERS

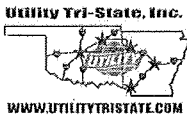
Name:	Title:	Address:	City:	State:	Phone:
Name:	Title:	Address:	City:	State:	Phone:
Name:	Title:	Address:	City:	State:	Phone:

MAJOR TRADE SUPPLIER REFERENCES

Trade Name #1	Contact/Title	Phone:	Fax:
Trade Name #2	Contact/Title	Phone:	Fax:
Trade Name #3	Contact/Title	Phone:	Fax:
Trade Name #4	Contact/Title	Phone:	Fax:

BANK REFERENCES

Bank Name:	Account #:	City:	State:	Contact:	Phone:
Bank Name:	Account #:	City:	State:	Contact:	Phone:



UTILITY TRI-STATE, INC.



TULSA, OK

15335 E. Admiral Place
Tulsa, OK 74116
Phone: (918) 437.0010
Fax: (918) 438.7032

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Customer Account Credit Application for Parts and Service

The information given above is true and complete. Utility Tri-State, Inc. may receive from and disclose to other persons, including credit reporting agencies about Applicant and/or Business Owner's account and credit experience, and Applicant and/or Business Owner authorizes any person to release to Utility Tri-State, Inc. credit experience on Applicant and/or Business Owner made by Utility Tri-State, Inc. or any person requested to release such information.

In the case of default in payments, Utility Tri-State, Inc. shall be entitled to exercise remedies, in addition to all other rights permitted by law:

- To assess late fees and/or interest,
- To submit the debt to a collection agency,
- To submit the debt to all major credit bureaus,
- The Customer agrees to pay all costs of collection, including reasonable attorney's fees

In consideration of being allowed the privilege of an open credit account, the undersigned, an **authorized representative** for the above named company applying for credit, hereby understands and agrees to abide by the terms and conditions of the Utility Tri-State, Inc. application, including but not limited to the following:

- 1) All Invoices are due and payable within (30) thirty days from the invoice date.
- 2) A 1 ½% monthly service charge will be made on all past due invoices.
- 3) All invoices are payable as rendered.
- 4) All claims for adjustment must be made within 5 days from the invoice date.
- 5) If invoices are not paid within (30) thirty days of the invoice date, account privileges will cease and we will be on C.O.D. basis.
- 6) Utility Tri-State Inc. has the right to limit the amount of credit extended.
- 7) Signature authorizes Utility Tri-State, Inc. to verify and/or check references, bank activity and credit information.

This agreement shall be governed by the laws of the State of Oklahoma.

I have read, understand and agree to the terms set forth above. (Must be Owner or Officer of the Company)

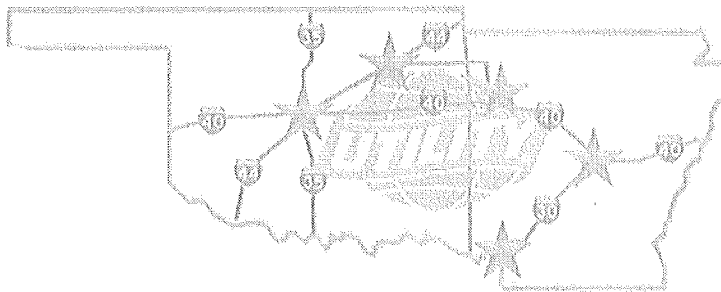
Signed:	Title
Print Name:	Date:

I do hereby personally guarantee this account with Utility Tri-State Inc. (Must be Owner or Officer of the Company)

Signed:	Title
Print Name:	Date:
SSN: (REQUIRED)	Date of Birth: (REQUIRED)

Revised 012915

Utility Tri-State, Inc.



WWW.UTILITYTRISTATE.COM