

# CUSTOMER ACCOUNT SETUP FORM

#### NEW ACCOUNTS WILL NOT BE SET UP WITHOUT AN OPENING PURCHASE ORDER

NEW CUSTOMER SETUP	NEW BRANCH SETUP		<b>CHANGE</b> (Reason for Change)	
PLEASE ESTIMATE MONTHLY PURC	HASES			
MONTHLY ESTIMATE:	CREDIT LINE:		OPENING P.O. #:	
LEGAL NAME OF FIRM:				
TRADE NAME (DBA):	DIV/SUBSIDIARY OF:			
IN BUSINESS SINCE (YEAR):				
PURCHASING CONTACT:	Т	ITLE: Mr	Ms Mrs	Dr Miss
PHONE:	FAX:		EMAIL:	
BILLING ADDRESS ADDRESS 1:	SHIPPING ADDRESS		DDRESS	
ADDRESS 2:		ADDRESS 1:		
CITY: STATE:		ADDRESS 2:		
POSTCODE: COUNTRY:		CITY:	STATE:	
PHONE: FAX:		POSTCODE:	COUNTRY:	
JAMES BILL TO CUSTOMER NO:		PHONE:	FAX:	

#### PLEASE ATTACH:

- W-9 FORM
- SALES AND USE RESALE CERTIFICATE



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**DOCUMENTS** (Copies of ALG Sales order Acknowledgements, Advance Ship Notices and Invoices)

(PLEASE PROVIDE COMPANY EMAIL ADDRESS ONLY)

SALES ORDER ACKNOWLEDGEMENT (SOA):	NAME:	EMAIL ADDRESS:		
INVOICES (INV): BILLING LOCATION ONLY:	NAME:	EMAIL ADDRESS:		
ADVANCE SHIPMENT NOTIFICATION (ASN):	NAME:	E: EMAIL ADDRESS:		
REFERENCE INFORMATION	 I			
BANK:		STREET ADDRESS:		
CITY, STATE, ZIP:		AREA CODE + PHONE:		
YOUR ACCOUNT NO:		CONTACT:		
VENDORS				
COMPANY NAME:		STREET ADDRESS:		
CITY, STATE, ZIP:		AREA CODE + PHONE:		
AREA CODE + FAX:		CONTACT:		
COMPANY NAME:		STREET ADDRESS:		
CITY, STATE, ZIP:		AREA CODE + PHONE:		
AREA CODE + FAX:		CONTACT:		
PERSONAL GUARANTY				
l,				
RESIDING AT				
FOR AND IN CONSIDERATION	OF			
EXTENDING CREDIT TO				
this guaranty shall be a continuing and irrevocable guara	u on demand any sum wanty, and indemnity for s	y of said credit, I , hereby personally guarantee to you the payment of any obligation of the hich may become due to you by the Company whenever the Company shall fail to pay the same. It is understood the uch indebtedness of the Company. I do hereby waive notice of default, nonpayment and notice thereof and consent to an of the Company must sign below as individuals – signatures only, no corporate titles.		
COMPANY NAME:		SS#		
SIGNATURE:		DATE:		

PRINT NAME:



### STANDARD PAYMENT TERMS OF AGREEMENT

This Standard Payment Terms of Agreement\* ("Agreement") is made and entered by and between AXIS LED GROUP, LLC & ("CUSTOMER").

("CUSTOMER") agrees to pay ALG to this banking information:

BENEFICIARY BANK: PNC BANK

BENEFICIARY NAME: AXIS LED GROUP, LLC

BANK ADDRESS: 6680 PERIMETER DR DUBLIN, OH 43016

ACCOUNT NO.: 4104208904 ROUTING NO.: 041000124

Company Address:

AXIS LED GROUP, LLC 2953 Honore Street Chicago, IL 60657

## APPLICANT'S SIGNATURE BELOW ATTESTS APPLICANTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY ALG INVOICES AS PROVIDED BELOW AND AGREEMENT TO THE FOLLOWING:

This Customer Account Setup Form is an application by Applicant for credit from ALG and all information in this form is warranted by Applicant to be true and accurate. Applicant authorizes ALG to investigate the information provided to ALG including but not limited to the references listed above, and the credit and financial responsibility of Applicant.

- 2. Applicant shall pay ALG invoices in accordance with ALG payment items:
  - Customer will send payment confirmations to QUOTES@ALG-USA.COM.
  - -ALG agrees to pay all shipping charges and duty\* (\*if necessary) on all shipments from ALG to customer.
  - Customer agrees to pay NET30 upon shipment.
  - Customer will submit purchase order (PO) with product and quantities.
- 3. ALG willingness to sell products to Applicant is conditioned upon, among other things, Applicant's acceptance of ALG Terms and Conditions of Sale. Accordingly, Applicant (referred to as "Buyer") accepts and agrees to ALG Terms and Conditions of Sale as such are attached to this Customer Account Setup Form or are revised (for sales that take place at least 30 days after such revision).

NAME:	DATE:
AUTHORIZED SIGNATURE:	TITLE:
NAME:	DATE:
ALITHORIZED SIGNATURE:	TITLE: