



CUSTOMER INFORMATION SHEET

COSMOTEC Customer

Please complete all fields, sign and fax to (301) 662-5487

STULZ Customer

STULZ Air Technology Systems Inc. - OFFICE USE ONLY

Job Number(s): _____

Amount of Order: \$ _____ Purchase Order #: _____ (Attach copy)

Approximate Ship Date: _____ Initials of CSR: _____

Business/Firm Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone #: (____) _____ Fax #: (____) _____ E-Mail: _____

Contact: _____ Year Established: _____

DUN & BRADSTREET #: ____ - ____ - _____ Corporation ____ Partnership ____ Sole Proprietorship ____

NAMES & TITLES OF PRINCIPLES / OFFICERS:

1) _____ Title: _____

2) _____ Title: _____

3) _____ Title: _____

ACCOUNTS PAYABLE CONTACT:

Name: _____ Title: _____

Phone #: (____) _____ Fax #: (____) _____ E-Mail: _____

TRADE REFERENCES: (List three vendors from whom you have purchased in amounts equal to this order)

Name: _____ Address: _____

Phone #: (____) _____ Fax #: (____) _____ E-Mail: _____

Name: _____ Address: _____

Phone #: (____) _____ Fax #: (____) _____ E-Mail: _____

Name: _____ Address: _____

Phone #: (____) _____ Fax #: (____) _____ E-Mail: _____

1572 Tilco Drive Frederick, Maryland 21704 USA

Phone: 301-620-2033 Fax: 301-662-5487 www.stulz-ats.com us.stulz-cosmotec.com



BANK REFERENCE:

Bank Name: _____ Account #: _____

Address: _____

Contact: _____ Bank Officer: _____

Phone #: (____) _____ Fax #: (____) _____ E-Mail: _____

Applicant accepts and agrees to the following payment terms:

- Net 30

Credit terms are 30 days from date of invoice. Outstanding balances are subject to 1.5% per month interest.

The undersigned authorizes and releases STULZ, all banks, persons, and companies listed on this application to furnish information for credit review.

The undersigned agrees to pay all collection costs, court costs, and legal fees incurred to collect delinquent balances.

Name: _____ Title: _____

Signature: _____ Date: _____

Personal Guarantee:

In consideration for credit extended, the undersigned contracts and guarantees to the faithful payment, when due, of all accounts of the company seeking credit for 5 years from the date of this application. The undersigned guarantor expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notice of default by the company seeking credit and all other notices the guarantor might be entitled to. Revocation of the guarantee shall be in writing and delivered by certified mail.

Name: _____ Title: _____

Signature: _____ Date: _____

SALES TAX EXEMPTION:

- Resale Certificate attached Exempt Certificate attached Not sales tax exempt

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