

## PARTS REQUEST FORM

***PLEASE EMAIL COMPLETED FORM TO INSIDE SALES  
PARTS@MIDATLANTICMACHINERY.COM***

Have you purchased from us before?      YES                      NO

**\*IF NO, PLEASE FILL OUT PAGE 2 AS WELL\***

Company Name:	Date:
Address:	
Contact Name:	Telephone:
Email:	Fax:

**Accounts Payable Contact:**

Contact Name:	Telephone:
Email:	Fax:
Billing Address:	
AP Manager:	Telephone:
Email:	

**Parts being requested:**

Manufacturer Name:	Machine:	Machine Serial #:	Part #:	Quantity:

Comments/Description:

Customers Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Customer's Printed Name: \_\_\_\_\_

## Credit Application FORM

*\*PLEASE ATTACH W-9 WHEN SENDING FORM BACK\**

### BUSINESS CONTACT INFORMATION

<b>Title</b>		<b>Date business commenced</b>	
<b>Company name</b>		<input type="checkbox"/> <b>Sole proprietorship</b>	EIN #
<b>Phone</b>		<input type="checkbox"/> <b>Partnership</b>	Sales Tax #
<b>E-mail</b>		<input type="checkbox"/> <b>Corporation</b>	
<b>Registered company address</b>		<input type="checkbox"/> <b>Other</b>	
<b>City, State ZIP Code</b>			

### BUSINESS AND CREDIT INFORMATION

<b>City, State ZIP Code</b>		<b>Bank name:</b>	
<b>How long at current address?</b>		<b>Primary business address</b>	
<b>Phone</b>		<b>City, State ZIP Code</b>	
<b>Fax</b>		<b>Phone</b>	
<b>E-mail</b>		<b>Account number</b>	
		<b>Type of account</b>	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

### BUSINESS/TRADE REFERENCES

<b>Company name</b>	<b>Phone</b>
<b>Address</b>	<b>Fax</b>
<b>City, State ZIP Code</b>	<b>E-mail</b>
<b>Type of account</b>	<b>Other</b>
<b>Company name</b>	<b>Phone</b>
<b>Address</b>	<b>Fax</b>
<b>City, State ZIP Code</b>	<b>E-mail</b>
<b>Type of account</b>	<b>Other</b>
<b>Company name</b>	<b>Phone</b>
<b>Address</b>	<b>Fax</b>
<b>City, State ZIP Code</b>	<b>E-mail</b>
<b>Type of account</b>	<b>Other</b>

*Signature*

1. All invoices are to be paid 20 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Mid Atlantic Machinery to make inquiries into the banking and business/trade references that you have supplied.