

Business Name \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

How many years have you been in business? \_\_\_\_\_

(Please check one)

Is this a:  Corporation  Sole Proprietorship  Partnership

**Ownership:**

President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Treasurer: \_\_\_\_\_

**Finance:**  Savings  Checking  Loan

Bank \_\_\_\_\_ Account# \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Account Rep \_\_\_\_\_

**Commercial Trade References**

Give ONLY names of those you buy from on OPEN ACCOUNT.

**\*WE WILL NOT PROCESS THIS APPLICATION WITHOUT FULL NAME, ADDRESS, PHONE AND FAX NUMBER\***

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Amount of credit desired monthly \$ \_\_\_\_\_

Authorized Buyers \_\_\_\_\_

Billing address (if different from above) \_\_\_\_\_

By approving this application, I agree to pay for all goods and services purchased within 30 days.

Butler Technologies, Inc. is authorized to contact any references or banks listed above. It is understood that any information so obtained will be used solely for granting credit.

Sign \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

Note: Butler Technologies, Inc. Terms and Conditions of Sale can be found at [www.butlertechnologies.com](http://www.butlertechnologies.com)