

New Customer Account Form – External



BOSCH

Please return the completed and signed form to **Direct.account@boschrexroth-us.com**

Sold-To _____	Date _____
Legal Business Name _____	Parent Company _____
Owner Name _____	Operating as _____ Fed ID No. _____
Street Address _____	Registration No. _____ EIN No. _____
City, State, Zip Code _____	VAT Number (if applicable) _____
County _____	DUNS Number _____ Year Started _____
Main Contact Phone Number _____	Legal Form of Business _____

Payer Name _____

Address _____

PO Box _____

City, State, Zip Code _____

County _____

Accounts Payable Contact Name _____

Contact Phone No. _____

Contact Fax No. _____

Email Address _____

A/P Supervisor Name _____

A/P Supervisor Phone _____

A/P Supervisor Email _____

Bill-To Name _____

Address _____

PO Box _____

City, State, Zip Code _____

County _____

Ship-To Name _____

Address _____

City, State, Zip Code _____

County _____

Ship Notice Email _____

Purchasing Contact Name _____

Contact Phone No. _____

Contact Fax No. _____

Contact Email _____

Bank Reference (Attach separate schedule if necessary)

Bank Name _____

Contact Name _____

Contact Phone No. _____

Address _____

City, State, Zip Code _____

Email Address _____

Account No. _____

Account No. _____

Payment Method

Preferred Method for Receipt of Invoices

To: _____

Preferred Method for Receipt of Statements

To: _____

Preferred Method for Acknowledgements

To: _____

Taxable?

***If No, attach copy of the Sales Tax Exemption certificate**

Blanket (Multiple States) Certificate Attached?

Individual State Certificate Attached?

INCO: _____

FREIGHT PAYMENT: _____

Small Carrier/Acct# _____

LTL Carrier/Acct# _____

Legal Business Name

Date

Trade References (Attach or fill in below a minimum of three trade references)

1. Business Name _____	Contact Name _____
Email Address _____	Phone No. _____ Fax No. _____
2. Business Name _____	Contact Name _____
Email Address _____	Phone No. _____ Fax No. _____
3. Business Name _____	Contact Name _____
Email Address _____	Phone No. _____ Fax No. _____

All Applicants: Please read and sign below.

For the purpose of inducing _____ (“Bosch”) to extend credit for the purchase of goods and services, the undersigned (“Customer”) provides the information on the credit application (including the attached balance sheet and income statement, if requested) and authorizes Bosch to make such inquiries and utilize such resources as it deems appropriate to obtain information regarding Customer’s credit and financial history and responsibility, and for this purpose, authorizes and approves the release of all such information by the trade reference(s) and bank(s) listed above. Customer acknowledges that Bosch may rely on the information provided above, and accordingly, represents and warrants that the information is complete, true, and accurately reflects the present financial condition of Customer. Customer also agrees that the information submitted does not omit any material facts regarding its financial conditions, results of operations, or prospects. It is understood that Bosch may also utilize other

sources of credit information that it considers reliable. If credit is granted, and Customer later fails to pay any indebtedness to Bosch when due, becomes bankrupt, or is deemed by Bosch to be insolvent at any times, Bosch may declare the entire balance of the indebtedness in default, and in such event, the entire balance shall become immediately due and payable. In the event of a delinquency or default, the Customer agrees to pay Bosch standard late charges allowed by law, plus reasonable collection costs and attorney fees that may be incurred by Bosch. Unless otherwise agreed, Bosch standard terms are Net 30 days.

The above is understood, agreed, and accepted by:

Applicant Signature _____
(AUTHORIZED SIGNATURE)

Print Name _____

Title _____ Date _____