



950 Paso Robles St.
 Paso Robles, CA 93446
 P: (805) 226-9600
 F: (805) 457-8240
 Shoretek.com

New Customer Application

Payment Remit to Address:

PO Box 480
 Templeton, CA 93465

*Send Completed Application: bryan@shoretek.com

To Shore-Tek Inc. and its subsidiaries and affiliates: for the purpose of gathering updated and accurate customer information and/or the intent to establish credit with STI, the undersigned Applicant furnishes the following information. Applicant represents and warrants said information is a true and correct statement of its financial condition. New customer gives authorization to charge credit card on file (if needed) for rental or purchase items.

Applicant Information

Business Name:

If Division/Subsidiary, Name of Parent Company:

Street Address:		Unit/Suite:	City/State/Zip:
Billing Address:		Unit/Suite:	City/State/Zip:
Business Phone:	Fax:	Email:	
Primary Contact:	Phone:	Email:	
AP Contact:	Phone:	Email:	
Business Type(Corp, LP, LLC, Sole Prop):			Contractor Lic. # / Tax ID:
Business Description:	In Business Since:	Avg No of Employees:	

Industrial Credit References

Company Name:		Company Name:	
Contact Name:		Contact Name:	
Address:		Address:	
Phone:		Phone:	
Email:		Email:	
Account Opened Since:	Credit Limit: \$	Account Opened Since:	Credit Limit:\$

Bank References

Bank:	Checking Acct No:	City/Branch:
Contact:	Phone:	Email:

Credit Card Information (If not setting up Credit)

Name on Card:			
Card#:	Exp Date:	Sec Code:	Zip Code:
Payment Receipt/Invoice Sent to:			

Information

Purchase Order Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	Tax Exempt? Yes <input type="checkbox"/> (attach certificate) No <input type="checkbox"/>	Liability Insurance Coverage? Yes <input type="checkbox"/> (attach certificate) No <input type="checkbox"/>
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Notes:

Authorized By: (Please Print or Type):	Title:	Signature & Date:
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