**New Account and/or Credit Application**

Email completed form to [newcustomer@gowaibel.com](mailto:newcustomer@gowaibel.com)

Company Name: 

Federal Tax Identification Number: Tax Exempt? If so, provide tax exempt certificate

Purchase Order Required  Pay By Credit Card  Other (Provide Special Instructions) 

**Who and How Do You Want to Receive Invoices**

Invoice Contact Name: 

Prefer (Provide Info Below): Emailed Invoice Mailed Invoice  Both 

Address: 

City, State, Zip: 

Telephone: (Office)  (Cell) 

E-mail Address: 

Additional Invoice Contact Info and/or Should Statements Go To Someone Different Than Invoices: 

**Credit Card Payment Information**

Please contact Accounts Receivable at (937) 264-4343.

**Special Payment Instructions**

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**Credit Application**

Credit Amount Requested: 

Credit Application Contact Name: 

Credit Application Contact Phone Number: 

Credit Application Contact Email: 

Bank Name: 

Bank Contact Name: 

Bank Contact Phone Number: 

Trade References (Name and Phone Number):

1. 

2. 

3. 

**Site Contact Information**

Site Contact Name: 

Ship To or Main Site Address: 

City, State, Zip: 

Telephone: (Office)  (Cell) 

E-mail Address: 

Additional Sites/Contacts: 

Authorized Name and Title: 

Authorized Signature: 

Date: Click or tap to enter a date.