



PHONE (800) 501-3256 email: nick@topoelement.com web site: www.topoelement.com

New Customer Account Application

Purchaser Information

Full Name:	<input type="text"/>	Street Address:	<input type="text"/>
Title:	<input type="text"/>	City:	<input type="text"/>
Business Name:	<input type="text"/>	State:	<input type="text"/>
% Ownership:	<input type="text"/>	Zip Code:	<input type="text"/>
Tax ID:	<input type="text"/>	Email:	<input type="text"/>
SSN (optional):	<input type="text"/>	Phone Number:	<input type="text"/>

Business Information

Type of Business:	<input type="text"/>	Responsible Party:	<input type="text"/>
Years in Operation:	<input type="text"/>	Street Address:	<input type="text"/>
State of Registry:	<input type="text"/>	City:	<input type="text"/>
Registry Number:	<input type="text"/>	State:	<input type="text"/>
Legal Entity Type:	<input type="text"/>	Zip Code:	<input type="text"/>
	Proprietorship		
	Partnership		
	Limited Liability Corp (LLC)		
	Corporation		
	Other (Describe)		
	<input type="text"/>		

Accounts Payable Contact Information

Full Name:	<input type="text"/>	Street Address:	<input type="text"/>
Title:	<input type="text"/>	City:	<input type="text"/>
		State:	<input type="text"/>
		Zip Code:	<input type="text"/>
		Email:	<input type="text"/>
		Phone Number:	<input type="text"/>

Trade References (list at least 1)

Account No. 1	Account No. 2
Business Name:	Business Name:
Contact Name:	Contact Name:
Business Street Address:	Business Street Address:
Contact Phone:	Contact Phone:
Account Age (Years):	Account Age (Years):
Credit Limit:	Credit Limit:
Current Balance:	Current Balance:

Account No. 3	Account No. 4
Business Name:	Business Name:
Contact Name:	Contact Name:
Business Street Address:	Business Street Address:
Contact Phone:	Contact Phone:
Account Age (Years):	Account Age (Years):
Credit Limit:	Credit Limit:
Current Balance:	Current Balance:

Terms & Authorization

New Credit Applicant,

Many banks and creditors will not release credit information without the written authorization of their customer. In order to expedite the processing of your credit application, please complete the authorization information listed below.

Authorization to Release Credit Information to Topo Element Equipment

By signing/submitting this form, I consent to a credit report request by the creditor. I understand this may have a slightly negative, temporary impact on my credit score.

Applicant Full Name:	
Applicant's Signature:	
Date Signed:	