



Wythe Will Distributing

Customer Information and Credit Application

Please fill in all information, and mail original to:
Wythe Will Distributing LLC, 3612 LaGrange Parkway, Toano, VA 23168
 You may fax a copy to 757-566-5375 to expedite your account set up.
Tel # 757-566-5360

Company Name: _____

Mailing Address: _____

Shipping Address: _____

Telephone # _____ Fax # _____ Email: _____

In Business Since: _____ Fed Tax ID # : _____ Tax Status: Taxable _____ Exempt _____
(Please attach your tax exempt form)

(Check One) Proprietorship: _____ Partnership: _____ Corporation: _____
 If Corporation, is there a parent company? Yes _____ No _____
 If Yes, Please provide parent company name and Address: _____

Principal Owners or Officers:		
Name	Title	Phone #
_____	_____	_____
_____	_____	_____

References

Bank Reference:
 _____ Bank Contact : _____
 _____ Telephone # _____

Trade References:

Name	Telephone #	Fax #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Requested Credit Line: _____ A/P Contact: _____ Phone # _____

Terms of Sale - All orders are Prepaid until credit terms are approved. Credit Terms are Net 15 days from date of invoice should credit be granted. Prices are subject to change without notice. The minimum for a first order is \$200.00. Past due amounts are subject to interest at 1.5% per month.

Agreement to Terms

I affirm that the information provided on this application is correct. I have read, understand, and agree to the Terms of Sale above. I personally guarantee the payment of all outstanding invoices, as well as accrued interest and reasonable cost of collection, including attorney fees.

Print Name: _____ Signature: _____ Date: _____

Title: _____ Social Security # _____

Please document any special shipping and handling requirements.