



Main Office & Warehouse
 1681 W. Second St.
 Pomona, CA 91766
 Tel: 626-797-9710 Fax: 626-798-4659
WWW.DAWSONCO.COM

Application for Credit

Date:	Monthly Credit Desired:	
Firm Name:		
Phone Number:	Fax Number:	
Alt. Phone Number:	A/P Fax Number:	
Street Address:		
City:	State:	Zip:
Billing Address:		
City:	State:	Zip:

Type of Business:	Year Established:
Resale Number:	<i>(Please submit copy of ReSale Card)</i>
California State Contractor's License Number:	
Name of Bonding Company:	
I will supply a current financial statement if required:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you interested in paying via electronic fund transfer (EFT)?	Yes <input type="checkbox"/> No <input type="checkbox"/>

If a corporation, please complete this section:

We are incorporated under the state laws of:		
Name:	Title:	
Social Security Number:	Federal ID Number:	
Street Address:		
City:	State:	Zip:
Name:	Title:	
Social Security Number:	Federal ID Number:	
Street Address:		
City:	State:	Zip:

If a partnership or individual, please complete this section:

Partner/Owner Name:		
Social Security Number:	Driver's License Number:	
Street Address:		
City:	State:	Zip:
Accounts Payable Office/Contact Name:		
Direct A/P Phone Number:	Direct A/P Fax Number:	
Email Address:	Business Hours:	



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Trade References (Give only names of those you buy from on an open account):

Name:		
Telephone Number:	Fax Number:	
Street Address:		
City:	State:	Zip:
Name:		
Telephone Number:	Fax Number:	
Street Address:		
City:	State:	Zip:
Name:		
Telephone Number:	Fax Number:	
Street Address:		
City:	State:	Zip:
Checking Account Number:	Savings:	Loans:

Individuals authorized to sign on an open account:

Name:	Title:
Name:	Title:
Name:	Title:
Name:	Title:

Buyer Name:	Email Address:
Is a Job Number required for billing?:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is a Purchase Order Number Required for billing?:	Yes <input type="checkbox"/> No <input type="checkbox"/>

Buyer hereby warrants that the above information is true and correct, furnished for purpose of obtaining credit. In consideration of credit extended, buyer agrees to pay all purchases in accordance with the terms shown on invoice. Buyer agrees to pay all reasonable attorney's fees and/or collection charges incurred by Seller by reason of Buyer's default in payment on this account. Past due accounts shall bear interest at the rate of 1% per month.

Signature and Title

Name of Firm

Who may we thank for referring you to Dawson Co.?

Company:	Individual:
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For Dawson Company Internal Use Only

Salesman #:	Notations:
Territory Code:	
Customer Type:	
Lead Source:	<input type="checkbox"/> Inside Sales <input type="checkbox"/> Order Pending <input type="checkbox"/> Outside Sales <input type="checkbox"/> Other:



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Order Acknowledgement and Shipping Notice

In our quest to improve Customer Service, we have implemented an Order Acknowledgement and Shipping Notice process. If you are interested in receiving our Order Acknowledgement and Shipping Notice, please complete this form and return it per the instructions below. You have the option of being notified through either email or fax. Please note that the individual named and submitted will receive ***all*** notifications selected. *(If you are not interested, you may leave this page blank.)*

Purchasing Contact Name:

Purchasing Contact Email Address:

Purchasing Contact Fax Number:

Please check either Email or Fax option for **Order Acknowledgement:**

- Email Order Acknowledgement
 Fax Order Acknowledgement

Please check either Email or Fax option for **Shipping Notice:**

- Email Shipping Notice
 Fax Shipping Notice