



WHOLESALE BATTERIES, Inc.

The Right Battery the First Time!

Customer Credit Application

Please complete all sections of the credit application and sign the form acknowledging the terms and conditions of sale. This data will be entered quickly so the products and/or services required can be delivered in a timely manner. **Please return to either your salesperson or via email to our Accounting team: ar@wholesalebatteries.net**

Date: _____

Company Information

Name:		
Address:		
City:	State:	ZIP:
Years in Business:	Phone#	Fax#
(Dun & Bradstreet)DUNS#		
Accounts Payable Contact:		Phone#
Accounts Payable Email:		
Name of Company Principals Responsible for Business Transactions:		
Name:	Title:	
Name:	Title:	
Name:	Title:	

Are products purchased for resale? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please complete page (3)
---	---

Bank References

Institution Name:
Point of Contact
Address:
Phone:

Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Email:	Email:	Email:
Address:	Address:	Address:
Phone:	Phone:	Phone: