



P.O. Box 7517
 Rocky Mt, NC 27804
 252-977-7832
 fax 252-977-6215
 800-445-4803
 www.duncan-parnell.com

New Account Application

Please check if:

Faxing Invoices OK _____
 Prefer Monthly Billing _____
 Prefer Monthly Stmt _____

Legal Name of Firm _____
 Street Address _____
 Suite or Number _____
 City _____
 Billing Address _____
 City _____

Phone _____
 Fax _____
 E-mail _____
 State _____ Zip _____
 State _____ Zip _____

Type of Business _____ How long in Business _____
 Previous Address (If less than 1 year) _____
 If Branch, Address of Home Office _____

Corporate Principals

Name _____ Position _____
 Name _____ Position _____
 Name _____ Position _____

Name of Purchasing Agent _____

Name of Accounts payable Contact _____

Persons authorized to use the Account

Name _____ Position _____
 Name _____ Position _____
 Name _____ Position _____

Local Trade References (No credit cards or Department Stores, please) or attach list.

Firm _____	Firm _____	Firm _____
Location _____	Location _____	Location _____
Contact _____	Contact _____	Contact _____
Phone _____	Phone _____	Phone _____

Purchase Order required? _____ Tax Exempt? _____ *If yes, please provide certificate*

Note: It normally takes us 5 business days to receive and process information from the creditors that you provide us. If you require immediate shipment, please provide us with your credit card information below and we will ship immediately and charge the initial shipment to your credit card. We will proceed with processing your application and any further shipments will be invoiced to your new account upon approval.

Card Type _____ Card billing zip code _____
 Card Number _____ Exp Date _____
 Name on the Card _____ 3 digit code _____

(Back of card at end of acct #)

For Internal Use

Originated By _____
 Approved By _____
 Salesman _____
 Credit Line Request _____
 Opened By _____
 Customer # _____

I Understand that purchases made from Duncan-Parnell are payable 10 days after the end of the month in which the purchases are made and agree to maintain my account on that basis.

Firm Name _____
 By (signature) _____
 Position _____
 Date _____