



Date: _____ Sierra Chemical Salesperson: _____

Company Information

Name: _____

Bill To Address: _____

Ship To Address: _____

Receiving Hours: _____ to _____

Phone #: _____

Fax #: _____

Are you tax exempt? YES NO

If yes, please fax your Tax-Exempt form with this credit application.

Company is: PARTNERSHIP PROPRIETORSHIP CORPORATION

Company has been in business since: _____

Company Officers

President: _____ Phone: _____

Vice President: _____ Phone: _____

Accounts Payable: _____ Phone: _____

Bank Information

Name: _____

Address: _____

Phone #: _____ Contact: _____

Credit References

1) Company Name: _____

Address: _____

Telephone #: _____

Fax #: _____

2) Company Name: _____

Address: _____

Telephone #: _____

Fax #: _____

3) Company Name: _____

Address: _____

Telephone #: _____

Fax #: _____

4) Company Name: _____

Address: _____

Telephone #: _____

Fax #: _____