



P.O. Box 1001 | 228 Andover St. | Wilmington, MA 01887

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## NEW ACCOUNT APPLICATION

Account / \_\_\_\_\_ Sales Route / \_\_\_\_\_

### BUSINESS CONTACT INFORMATION

Company name		DBA	
Accounts Payable Contact		<input type="checkbox"/> Individual	
Phone   Fax		<input type="checkbox"/> Partnership	
E-mail		<input type="checkbox"/> Corporation	
Company Address		<input type="checkbox"/> Taxable	
City, State ZIP Code		<input type="checkbox"/> Non-taxable (tax exempt certificate must be attached)	
Federal Tax ID		Number of Employees	
Date Business was established		Amount of Credit Requested	

### BANK REFERENCES

Bank name:		Address	
Contact		City, State ZIP Code	
Phone		Phone	
Fax		Account number	
E-mail		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

### BUSINESS/TRADE REFERENCES

Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	

### GENERAL TERMS AND CONDITIONS

1. Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with the following terms: NET 20 DAYS.
2. Applicant agrees to pay any collection expenses, including attorney's fees, interest and court costs, which may become necessary to effect collection of this account.
3. Packaging designs, drawings and samples submitted relative to and in conjunction with all Arrow Paper quotations remain the sole intellectual property of Arrow Paper Corp. The unauthorized use, distribution and/or reproduction are strictly prohibited. All rights reserved.
4. This information is given in confidence for the purpose of establishing credit with Arrow Paper Corporation. Authorization is hereby given to make inquiry of all trade and financial sources, which are deemed to be necessary by Arrow Paper Corporation to evaluate this application.

I have read the terms and conditions stated above and agree to all of these terms and conditions.

## SIGNATURES

Authorized Signature			
Printed Name		Title	
Date		Date	

Those signing this application, whether signing as an offices or not, personally guarantee payment for all items purchased on credit by the applicant

## PERSONAL GUARANTEE

Authorized Signature			
Printed Name		Date	