

Private Account Request Form

Please complete the following information and return by email or fax. Account requests for private business accounts (For-Profit/Non-Profit/Non-Government/Corporate) typically process within 10-14 business days.

E-mail: sales@icswaco.com

Fax: 254-751-0299

Please include a copy of your tax exempt form and/or your reseller certificate with this request. Account requests WILL NOT be processed without these documents.

Billing Address:		Shipping Address: (if different from billing)	
Send my annual catalog here.		Send my annual catalog to: Physical A	ddress Mailbox
Facility Name		Facility Name	
Billing Address		Physical Address	
City	County	Mailbox Address	
State	Zip	City	County
Billing Contact Name		State	Zip
Phone ()	_ Fax ()	Facility Contact Name	
E-mail Address		Phone ()	Fax ()
(For Invoicing)		E-mail Address	
Use this e-mail for my web store login.		Use this e-mail for my web store login.	
Business History/Inf	ormation:		

Please answer the following questions.

 1. How long have you been in business?

 2. What type of accounts/customers do you sell to?

 3. What type of products do you primarily sell?

 4. Do you keep inventory/stock in an on-site warehouse?

 5. Please advise of any current government contracts.

 6. Please provide your webstore address if applicable.

 7. How did you hear about us?

 8. Private accounts must be paid by credit card until credit line is approved by accounting. Accounts must be active for 60-90 days before line of credit is considered. Please initial that you agree.

 9. Private account freight terms are FOB Waco or FOB Mill. Please initial here that you agree.

 Signature
 Date

Office Use Only:	New Customer ID:			Existing Customer ID:	
ACT CL	FDM4	NS	Web	Info/Address Update	
	L	_ P	С		

www.icswaco.com | 1-800-524-5427 | sales@icswaco.com | Fax 254-751-0299