

Customer Information

Corporate Information

Corporate Name			Phone Number
DBA/AKA (If different from company name)			Email
Type of Business (Please check one) ☐ Proprietorship ☐ Partnership ☐ Corporation ☐ LLC ☐ Other _____			
Federal Identification Number	Duns Number	Yr. Business Established	Tax Status – mandatory for approval ☐ Taxable ☐ Tax Exempt – Attach Resale / Exemption Certificate for each ship-to location
Has the company ever filed for bankruptcy protection? ☐ Yes ☐ No		If yes, please specify date and type of filing	

Account Information

Billing Address	City	State	Zip Code
Ship-to Address, if different than above Invoice Submission A/P	City	State	Zip Code
Contact Person, if different than above	Phone	Email	
FedEx or UPS Account Number	Phone	Email	

Owners, Principal Officers of the Firm

Name	Title
Name	Title

Bank Reference

Bank Name	Phone #	City, State	Account Number
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Trade Reference (No Credit Cards, Utilities, Personal Accounts or Landlords)

Company Name	Phone #	Contact Person	Email
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Company Name	Phone #	Contact Person	Email
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Company Name	Phone #	Contact Person	Email
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By affixing their signatures, the undersigned (or if a Corporation, the Corporate Officer / Agent) agrees:

1. That the information contained herein is accurate, complete, and true
2. To pay all Fortis invoices within Fortis sales terms as stated on the invoice and or MSA. Past due invoices will be subject to late fees
3. That Fortis or its affiliate to obtain any information necessary to process our credit application including, but not limited to, information regarding savings, deposit checking, and outstanding credit accounts

Name	Signature	Title	Date
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The signing of this application does not guarantee the opening of your account. All fields must be completed in their entirety with all required attachments included or the application will be denied.