

Dear Dealer: Save time and help your customer! Please have them complete the following information to establish your customer with a Kaeser & Blair open account. All information is required. If there are any questions or problems, you will be notified immediately.

### CREDIT APPLICATION

**Business Name** \_\_\_\_\_ **Years in Business** \_\_\_\_\_  
**Street Address** \_\_\_\_\_  
**Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Name of Owner/Officer** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Soc. Sec. #** \_\_\_\_\_ **Federal ID#** \_\_\_\_\_  
**D & B #** \_\_\_\_\_

**Trade References** (Do not list banks or credit card companies.)

**Name** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**Street Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**How long have you done business with this company?** \_\_\_\_\_  
**Account #** \_\_\_\_\_  
**Name** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**Street Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**How long have you done business with this company?** \_\_\_\_\_  
**Account #** \_\_\_\_\_

**Name** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**Street Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**How long have you done business with this company?** \_\_\_\_\_  
**Account #** \_\_\_\_\_  
**Name** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**Street Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**How long have you done business with this company?** \_\_\_\_\_  
**Account #** \_\_\_\_\_

**Bank Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
 I hereby authorize permission to call my bank as a reference.  
**Bank Officer Name** \_\_\_\_\_ **Acct. #** \_\_\_\_\_

### UNIFORM SALES & USE TAX CERTIFICATE

Issued to (Seller)		Address	
<b>I CERTIFY THAT</b>	Name of Firm (Buyer)		
	Street Address or Post Office Box Number		
	City	State	Zip Code
<b>QUALIFIES AS (Check each applicable item)</b>	<input type="checkbox"/> WHOLESALER <input type="checkbox"/> RETAILER <input type="checkbox"/> MANUFACTURER <input type="checkbox"/> LESSOR* (See note on reverse side) <input type="checkbox"/> CHARITABLE OR RELIGIOUS		
	<input type="checkbox"/> POLITICAL SUBDIVISION OR GOVERNMENTAL AGENCY <input type="checkbox"/> OTHER (Specify)		
	and is registered with the below listed states and cities within which your firm would deliver purchases to us which are for resale or lease by us in the normal course of our business which is _____ or that such purchases are exempt from payment of sales or use tax in such states and cities because the buyer is:		
<input type="checkbox"/> CHARITABLE OR RELIGIOUS <input type="checkbox"/> POLITICAL SUBDIVISION OR GOVERNMENTAL AGENCY <input type="checkbox"/> OTHERWISE EXEMPT BY STATUTE (Specify)			
City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number
<i>I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sales or Use Tax we will pay the tax due direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state.</i>			
General description of products to be purchased from the seller			
Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.			
Authorized signature (Owner, Partner, or Corporate Officer)		Title	Date