



**ACCOUNT APPLICATION**  
Open Credit or Credit Card Purchases

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  Delivery Address Same as Billing Address

Delivery Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Web: \_\_\_\_\_

Sales Tax Rate % (of delivery address): \_\_\_\_\_ % County of delivery address: \_\_\_\_\_

Tax Exempt:  No  Yes (Attach Certificate) PO Required:  No  Yes Average Monthly Purchases: \$ \_\_\_\_\_

Special Delivery Instructions: \_\_\_\_\_

Accounting Contact: \_\_\_\_\_ email: \_\_\_\_\_

Purchasing Contact: \_\_\_\_\_ email: \_\_\_\_\_

Method of Receiving Statements:  estatements/email: \_\_\_\_\_ or  By Mail

**Person(s) Allowed to Order on this Account (more can be added)**

First/Last Name	email	Phone Number
1		( )
2		( )
3		( )

**SELECT ACCOUNT PAYMENT TYPE**

**Open Credit Charge Terms and Conditions:** Keeton's Office Supply Co., Inc. ("Keeton's") requires this form to be completed to establish an "open credit" charge account. The credit limit is based on your monthly purchase amount and your payment history. The undersigned ("Customer") certifies that everything in this application is true, complete and hereby agrees to all terms and conditions of this agreement. Customer certifies that he/she has the power to make, deliver, and perform under this Agreement, and that the undersigned Customer is duly authorized to enter into this Agreement for and on behalf of Customer. **Payment Terms:** Customers with an "open credit" charge account with Keeton's will have terms of: Net due on 10th of month following previous month's purchase. A statement will be produced at the beginning of each new month and delivered to you based on your method of how you chose to receive statements. See Above. Past due amounts are subject to a late payment service charge of 1.5% per month, which is an annual rate of 18%. If credit is extended, Customer agrees to pay all debts incurred within the terms of sale. Should the debt become past due, Customer expressly agrees to pay service fees outlined in this agreement or the maximum permitted under applicable state law. Customer further expressly agrees to pay collection costs and attorney fees incurred in connection with the collection of this account. **Changes:** Applicant agrees to send Keeton's written notice of any future changes made in regards to the information on this application. New ownership requires a new Account Application form to be completed.

**Credit Card Terms and Conditions:** Customer agrees to pay all charges according to credit card issuer agreement and to keep credit card information current if on file with Keeton's Office Supply Co., Inc.

Credit Card Number: \_\_\_\_\_ Name on Credit Card: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ \*You may choose to call in your credit card information, or enter at time of order at Keetonsonline.com

**AUTHORIZATION**

I understand that the (electronic) signature below shall have the same legal effect as if made under oath.

\_\_\_\_\_  
Signature of Owner, Officer, or Authorized Agent

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**FOR KEETON'S USE ONLY**

S: \_\_\_\_\_ % Plans: (\_\_\_\_) (Y\_\_\_\_) (Z\_\_\_\_) (X\_\_\_\_) Route: \_\_\_\_\_ Sort Order: \_\_\_\_\_ New Account # \_\_\_\_\_

CR Limit \$ \_\_\_\_\_ AQ: \_\_\_\_\_ AL: \_\_\_\_\_ SLMS # \_\_\_\_\_ Entered By: \_\_\_\_\_ Date: \_\_\_\_\_