

World Wide Metric Inc.
Account Profile and Credit Application

Dear New Customer

Thank you for contacting World Wide Metric.

In order to process your application to receive credit terms, we ask that you complete the following forms and return by fax to 732-247-2455:

1. Account Profile
2. Credit application
3. Preferred Freight Carriers
4. Include a copy of your resale/exempt certificate

All forms must be completed and signed by a principal of the company. No credit will be given without this information. Please be sure to include full names for all contacts.

We appreciate your cooperation.

Regards,

World Wide Metric

World Wide Metric Account Profile

Invoice/Mailing Address:

Business Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Country: _____
Phone: _____ Fax: _____ email: _____

Ship To:

Business Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Country: _____
(If you have additional locations or branches, please copy this sheet and complete for each location)

Accounts Payable:

Contact Name: _____ Position: _____
Phone: _____ Fax: _____ email: _____

Are purchase orders required by your company to process invoices? _____yes_____no

Authorized Buyers:

Contact Name: _____ Position: _____
Phone: _____ Fax: _____ email: _____

Contact Name: _____ Position: _____
Phone: _____ Fax: _____ email: _____

Contact Name: _____ Position: _____
Phone: _____ Fax: _____ email: _____

(If you have additional buyers, please copy this sheet and continue)

I certify that the above information is true and correct, and understand that I am fully responsible to report any changes in personnel by resubmitting the above form. Failure to do so, will be my responsibility and we guarantee payment on all invoices. I further warrant that my signature is valid and binding for entering into such an agreement.

Signature

Date

Print Name

Title

