

Cables & Chips Inc.
121 Fulton Street, New York, NY 10038
Corporate Account Application Form

Please complete this form and fax it to: (212) 619-3982.

Please Complete Applicable Fields Only

Company Name: _____
DBA/Parent Company (name if any): _____
Billing Address: _____ City/State/Zip: _____
Shipping Address: _____ City/State/Zip: _____
Phone#: _____ Fax#: _____ Web Address: _____
Main Business Activities: _____
State Sales Permit #: _____ Federal Tax ID #: _____
Established (MM/YY): _____ Number Of Employees: _____
Past 12 Months' Gross Sales: _____

Ownership: Corporation Partnership Sole Proprietor State of Incorporation: _____
Authorized Buyers (Name & Title): _____

Credit Card Information (As backup payment method and proof of credit references)
Card Type: _____ Card Number: _____ Expiration Date: _____
Billing Address: _____ City/State/Zip: _____

Bank Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____
Checking Account #: _____ Savings Account #: _____
Account Officer: _____ Phone: _____

Trading References (Name, Mailing Address, Phone and Fax Numbers):
1) _____
2) _____
3) _____

By Signing below, I/We authorize the bank and references listed above to release our credit and bank information to Cables & Chips, Inc.

Name (Print) Signature Title Date

By Signing Below, I/We agree to pay Cables & Chips, Inc. on time.

Name (Print) Signature Title Date

Please complete this form and fax it to: (212) 619-3982. For assistance call (212) 619-3132 or e-mail: chips-ny@CablesandChipsInc.com. Resellers, please provide your current resale certificate from your State.