



# ACCOUNT ESTABLISHMENT FORM

[EMAIL Account Establishment Form](#)

## 1. CUSTOMER INFORMATION (\* - Required for all customers)

Fed Tax ID#:		Dun & Bradstreet #:	
*Legal Company Name:			
*Physical Address:		**Bill To" Address (If Different):	
*City:	*County:	City:	County:
*State:	*Zip Code: -	State:	Zip Code: -
*Phone #: - -	Fax: - -		
Credit Line Amount Requested: \$		Credit Line Contact:	
Accounts Payable Contact:		Credit Line Contact E-mail:	
Accounts Payable E-mail:		Phone Number (A/P) : - -	
<b>PO Requirements</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		*Does your organization require a purchase order number (PO #) as a condition of your invoicing requirements?	
*Tax Status: <input type="checkbox"/> Taxable  <input type="checkbox"/> Exempt		<b>TAX WILL BE BILLED</b> IF A VALID EXEMPTION CERTIFICATE IS NOT ON FILE BEFORE EQUIPMENT, PARTS, OR SERVICES ARE PROVIDED. <b>IF EXEMPT PLEASE SUBMIT A TAX EXEMPTION CERTIFICATE TO FINANCIAL SERVICES TAX. SEE <a href="http://WWW.TAXSITES.COM/STATE-LINKS.HTML">WWW.TAXSITES.COM/STATE-LINKS.HTML</a> FOR SPECIFIC STATE TAX FORMS.</b>	

## 2. TRADE REFERENCES

1. Name:		Contact: dfdfd	
Address:	City:	State:	Zip:
Phone: - -	Fax: - -		
2. Name:		Contact:	
Address:	City:	State:	Zip:
Phone: - -	Fax: - -		

The undersigned authorizes release of any credit information requested by Trane from the above references. In consideration of open account terms with Trane, applicant agrees to all terms and conditions of Trane. This Account Establishment Form and information contained is accurate and is a request for the extension of credit. Trane has the option of placing the account on credit hold or closing the account. Applicant agrees to pay all costs of collection should this account be placed for collection. **AMOUNT OF CREDIT LINE REQUESTED MUST BE REVIEWED BY TRANE AND MAY NOT BE THE AMOUNT GIVEN.**

Name (please print):

Signature:	Title:	Date:
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## 3. PERSONAL GUARANTY

I, \_\_\_\_\_, residing at \_\_\_\_\_ for and in consideration of your extending credit at my request to \_\_\_\_\_ (hereinafter referred to as the "Company"), hereby personally guarantee the payment to Trane any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice here and consent to any modification of renewal of the credit agreement hereby granted.

Witness                      Guarantor                      Date:

### INTERNAL USE ONLY (To be completed by Sales Office)

Local Acct#:	CRM #:	Salesperson Code:	<input type="checkbox"/> Internal	<input type="checkbox"/> Company Owned
Status:	<input type="checkbox"/> New Customer	<input type="checkbox"/> Update	<input type="checkbox"/> Inactive	EC Acct #:
Trane Office Contact: Requestor:	Account Type (for Parts only):		1 - Contractor 1	
E-Mail:				

REQUIRED OFFICE CODE (ex. Los Angeles = W2) #:

A copy of Trane's standard terms and conditions are available upon request.

Revised 4/26/12 (Owner: B. Roers)