



WESTERN BUILDERS SUPPLY

Construction Fasteners & Building Materials Since 1945

 A Marmon Group/Berkshire Hathaway Company

New Customer Setup

Company Name:

Please complete and enclose the following:

- New Customer Setup Form (Below)
- Credit Application (only for businesses not billing through a third party or co-op)
- Trade References (only for businesses not billing through a third party or co-op)
- Company's W-9
- Company's State Sales Tax Exemption Form

Company Billing Information

Will you be billing through a third party or co-op? Name:

Corporate Affiliation:

Bill To:

Billing Address:

City: State: ZIP Code:

Payables Contact: Payables Phone:

Payables Fax: Payables Email:

Additional Payables Email:

Additional Payables Email:

Would you like Invoices and Statements: Emailed Faxed Both

Delivery Information

Shipping Address:

City: State: ZIP Code:

Orders

Do You Require a PO: Do you Allow Backorders:

Purchasing Contact: Purchasing Phone:

Purchasing Fax: Purchasing Email:

Additional Purchasing Email:

Additional Purchasing Email:

For Office Use Only:

Customer ID:

Verification Number:

Classification: LBM STA WBS HDW F&R Oth

53 North 15th Street, Suite 1, Billings, MT 59101
Phone: 1-800-726-4803 Fax: 1-866-251-6300



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A Marmon Group/Berkshire Hathaway Company

Credit Application for a Business Account

Business Contact Information	
Name and Title:	
Company name:	FEIN:
DBA:	Phone:
Fax:	E-mail:
Registered company address:	
City:	State: ZIP Code:
Date business commenced:	Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other <input type="checkbox"/>
Business and Credit Information	
Primary business address:	
City:	State: ZIP Code:
How long at current address?	Phone:
Fax:	E-mail:
Web address:	
Bank name:	
Bank address:	Phone:
City:	State: ZIP Code:
Type of account:	Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other <input type="checkbox"/>
Account Number:	Annual company wide sales:
Projected monthly purchase volume:	Projected required credit limit:
Are financial statements available:	
Primary business purpose/type of business:	
Agreement	
<ol style="list-style-type: none"> All invoices are to be paid 20 days from the date of the invoice. Claims arising from invoices must be made within seven working days. By submitting this application, you authorize Western Builders Supply, Inc. to make inquiries into the banking and business/trade references that you have supplied. I hereby certify that the information contained herein is complete, accurate and furnished for the purpose of establishing a vendor relationship. Signature required from employees who are authorized to sign contracts and/or authorize purchase orders on behalf of the company. 	
Signatures of Authorized Employees	
Signature:	Signature:
Printed:	Printed:
Title:	Title:
Date: Officer: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date: Officer: Yes <input type="checkbox"/> No <input type="checkbox"/>

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WBS A Marmon Group/Berkshire Hathaway Company

Credit Application for a Business Account

Company name:		
Business/trade references		
Company name:	Type of account:	
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	
E-mail:		
Contact:	Account open since:	
Credit limit:	Current balance:	
Company name:	Type of account:	
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	
E-mail:		
Contact:	Account open since:	
Credit limit:	Current balance:	
Company name:	Type of account:	
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	
E-mail:		
Contact:	Account open since:	
Credit limit:	Current balance:	

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