



5870 Tennyson Street, Arvada Colorado 80003 USA 800-972-0755 | 303-427-5700 | 303-427-5725 fax | www.wanco.com

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION		
Company (legal) name:		
Phone:	Fax:	
Website:	E-mail:	
Date business commenced:	Years in business:	
\square Sole proprietorship \square Partnership \square Corporation	☐ LLC ☐ Non-Profit ☐ Otl	ner
BUSINESS AND CREDIT INFORMATION		
DBA Name:		
Tax ID:	Tax Exempt: ☐ No ☐ Yes	
Reseller: \square No \square Yes If yes, include government-issued reseller certificate or sales permit.		
Primary business address:		
City:	State:	ZIP code:
D&B number:		
Bank name:		
Bank address:		
City:	State:	ZIP code:
Bank officer:	Phone:	Fax:
Type of account Account number	ount Account number	
Savings		
Checking		
Other ()		
BUSINESS/TRADE REFERENCES — Fax numbers are required		
Business/trade name:		
Contact name:	Phone:	Fax:
Account number:	Credit terms:	
Business/trade name:		
Contact name:	Phone:	Fax:
Account number:	Credit terms:	
Business/trade name:		
Contact name:	Phone:	Fax:
Account number:	Credit terms:	
Business/trade name:		
Contact name:	Phone:	Fax:
Account number:	Credit terms:	
Business/trade name:		
Contact name:	Phone:	Fax:
Account number:	Credit terms:	
AGREEMENT		
All invoices are to be paid according to the terms stated on each invoice. Invoices not paid within terms are subject to interest at 1.5% per month or the highest rate allowed by law. In the event of payment default, payee is responsible for cost of collections, to include but not limited to attorney fees, collection agency fees, and all other incidental costs associated with collection. By submitting this signed application, I hereby authorize Wanco Incorporated to make inquiries into the banking and business/trade references that I have supplied.		
Signed:	Name:	
Date:	Title:	

DR 0563 (08/30/13)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0013



Sales Tax Exemption Certificate Multi - Jurisdiction

See page 2 for instructions Last Name or Business Name First Name Middle Initial Address City State ZIP I Certify That Name of Firm (Buyer) Address City State ZIP Qualifies As (Check each applicable item) Wholesaler □ Retailer ☐ Manufacturer ☐ Charitable or Religious ☐ Political Subdivision or Governmental Agency ☐ Other (Specify) If Other, specify here 1) and is registered with the below listed states and cities within which your firm would deliver purchases to us which are for resale or lease by us in the normal course of our business which is or 2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is: ☐ Charitable or Religious ☐ Otherwise Exempt By Statute (Specify) ☐ Political Subdivision or Governmental Agency If Otherwise Exempt By Statue, specify here City or State State Registration or ID Number If the list of states and cities is more than six(6), attach a list to this certificate. I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sale or Use Tax we will pay the tax due direct to proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be called until canceled by us in writing or revoked by the city or state. General Description of products to be purchased from seller Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. Authorized Signature (owner, Partner or Corporate Officer) Date (MM/DD/YY)

To Our Customers:

In order to comply with the majority of state and local sales tax law requirements, it is necessary that we have in our files a properly executed exemption certificate from all of our customers who claim sales tax exemption. If we do not have this certificate, we are obligated to collect the tax for the state in which the property is delivered. If you are entitled to sales tax exemption, please complete the certificate and send it to us at your earliest convenience. If you purchase tax free for a reason for which this form does not provide, please send us your special certificate or statement.

*Lessor: A form DR0440, "Permit to Collect Sales Tax on the Rental or Lease Basis" must be completed and submitted to the Department of Revenue for approval.

Caution To Seller: In order for the certificate to be accepted in good faith by the seller, the seller must exercise care that the property being sold is of a type normally sold wholesale, resold, leased, rented, or utilized as an ingredient or component part of a product manufactured by the buyer in the usual course of his business. A seller failing to exercise due care could be held liable for the sales tax due in some states or cities.

Misuse of this certificate by the seller, lessor, buyer, lessee, or the representative thereof may be punished by fine, imprisonment or loss of right to issue certificates in some states or cities.