



# officemaster

## New Account Application/Request for Credit

Date: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Website: \_\_\_\_\_

President or Owner: \_\_\_\_\_

Business Started: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Acct. Payable Contact: \_\_\_\_\_

Purchasing Manager: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Checking Acct. No. \_\_\_\_\_

Key Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### TRADE REFERENCES: (Name, Address, Phone & Fax)

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_

Resale No. \_\_\_\_\_

\* Please fax to (408) 253.6062 or for faster service email to [support@omcal.com](mailto:support@omcal.com)

By signing this agreement, I am providing consent to have Office Master, Inc. and its authorized agents check my credit history. \_\_\_\_\_ (signature & date)

