



TEXAS INDICATOR & MICROMETER REPAIR SERVICE

All Precision Instrumentation, Gauges, Calibration & Repair,
Onsite Services, All work guaranteed

REQUEST TO OPEN ACCOUNT

DATE: _____

COMPANY NAME: _____

ADDRESS: _____
Street City State Zip

MAILING ADDRESS: _____
Street or P.O. Box City State Zip

PHONE #: _____ FAX #: _____

OWNERS OR OFFICERS: _____

TYPE OF BUSINESS: _____ # OF YEARS IN BUSINESS: _____

NAME OF PURCHASING AGENT OR PRINCIPAL BUYER: _____

PURCHASE ORDER REQUIRED: Y / N (Circle One)

STATE SALES TAX: Taxable? _____ Exempt? _____ Both? _____ (If always exempt please return blanket exemption certificate)

OTHER SPECIAL BILLING INSTRUCTIONS: _____

BANK REFERENCE: _____
Phone Loan Officer

TRADE REFERENCES (List at least three):

1) Name: _____ Phone #: _____ Fax #: _____

Address: _____ City: _____ State: _____ Zip: _____

2) Name: _____ Phone #: _____ Fax #: _____

Address: _____ City: _____ State: _____ Zip: _____

3) Name: _____ Phone #: _____ Fax #: _____

Address: _____ City: _____ State: _____ Zip: _____