

**PIPER PARTS PLUS CREDIT APPLICATION - PRINT AND FAX ONLY**

**Piper Parts Plus**  
 3746 Distriplex Drive North  
 Memphis, TN 38118  
 Credit Dept: 866-89PARTS, Fax (901) 259-6178  
 credit@piperpartsplus.com

REMIT TO:  
**Piper Parts Plus**  
 P.O. Box 1000; Dept. 433  
 Memphis, TN 38148-0026  
 866-89Parts

**Request for Open Account** Please check one:  Corporation  Partnership  Proprietorship

ENTITY LEGAL NAME

TRADE NAME

BILLING ADDRESS	SHIPPING ADDRESS
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CITY	STATE/ZIP	TELEPHONE	FAX NUMBER
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PRIMARY PARTS CONTACT	ACCOUNTS PAYABLE CONTACT	DATE BUSINESS STARTED	STATE INCORPORATED
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TYPE OF BUSINESS	AMOUNT OF CREDIT REQUESTED
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OFFICERS AND OWNERS NAMES	HOME ADDRESS AND TELEPHONE NUMBER
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**Trade Credit references**

COMPANY NAME	CITY/STATE/ZIP	TELEPHONE	FAX NUMBER
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COMPANY NAME	CITY/STATE/ZIP	TELEPHONE	FAX NUMBER
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COMPANY NAME	CITY/STATE/ZIP	TELEPHONE	FAX NUMBER
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**Bank Reference**

BANK NAME	BANK OFFICER	ADDRESS	CITY/STATE/ZIP
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THE UNDERSIGNED WARRANTS THE INFORMATION GIVEN TO BE TRUE. API IS AUTHORIZED TO INVESTIGATE THE REFERENCES HEREIN, STATEMENTS OR OTHER DATA OBTAINED FROM MY COMPANY OR FROM ANY OTHER PERSON PERTAINING TO MY CREDIT AND FINANCIAL RESPONSIBILITY. ALL CHRGS ARE DUE AND PAYABLE BASED UPON TERMS ON INVOICE. A LATE PAYMENT CHARGE OF 1.5% PER MONTH PLUS ATTORNEY'S FEE, IF NECESSARY FOR COLLECTION, WILL BE ADDED TO ANY BALANCE NOT TIMELY PAID. A \$25.00 FEE WILL BE ASSESSED FOR EACH NSF CHECK

**I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE CONDITIONS.**

BY	OFFICER	DATE
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**If your company qualifies for tax-exempt purchases, please complete the Resale Certificate below.**

**Blanket Certificate of Resale Multi-State**

**TO: API ,VENDOR**

NAME OF PURCHASER	SALES TAX REGISTRATION NO.
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ADDRESS	TYPE OF BUSINESS
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BY (SIGNATURE)	DATE
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TO CERTIFY TAX-EXEMPT STATUS, PLEASE PROVIDE THE APPROPRIATE STATE REGULATED RESALE CERTIFICATE.