



Professional Fire Alarm Systems • 6431 SE Bleckley St. • Topeka KS 66619 • Phone 785-379-0300 • Fax 785-379-0508

### CONFIDENTIAL CUSTOMER INFORMATION

Company Name			Federal Tax ID #
Phone Number	FAX Number	Accounts Payable Contact Name	Accounts Payable Phone
Preferred Delivery Method for Invoices: US Postal _____ Fax _____ Email _____			Accounts Payable Email: _____
Billing Address, City, State, Zip			
Shipping Address, City, State, Zip			
Nature of Business			Years In Business
Is Your Company Exempt from Sales Tax? (Circle One) Yes or No If 'Yes', please attach your exemption certificate	Nature of Exemption (Circle One): Education, Religious, Non-Profit, Resale, State of Kansas, US Government		Current Sales Tax Rate _____%

### TRADE CREDIT REFERENCES

Company Reference		Address
<b>1</b>	Company Name	Street Address
	Person to Contact	P.O. Box
	Phone Number	City/State/zip
<b>2</b>	Company Name	Street Address
	Person to Contact	P.O. Box
	Phone Number	City/State/Zip
<b>3</b>	Company Name	Street Address
	Person to Contact	P.O. Box
	Phone Number	City/State/Zip

### BANK REFERENCE

Name	Branch Address	
Account No.	Contact	Phone Number

### CREDIT AGREEMENT

*Customer verifies that the above information is true and correct and hereby grants permission for any person to furnish to PFAS any and all information which may be requested. Customer also agrees to pay for any and all materials or services ordered pursuant to its accounts, whether by the customer or by any person representing himself/herself to be an agent, employee, or representative of the company. The undersigned agrees to pay all invoices as per terms of sale. A deposit may be required on certain purchases. Purchaser also agrees to pay all collection costs and attorney's fees necessary to collect past due amounts, or to enforce the terms of sale. Interest on overdue accounts will accrue at the rate of 1.5% per month (18% per year) or the maximum rate permitted by law, whichever is less. PFAS will retain the title to all material/equipment and retain the right to remove said material/equipment if full payment is not made in a timely manner.*

**I understand and agree to the above terms.**

Name (Please Print or Type)	Title
Signature	Date

**SALES TAX: All sales are considered taxable unless a Certificate of Exemption is completed, signed, and attached.  
Please Mail or Fax to: PFAS, 6431 SE Bleckley St., Topeka, KS 66619, Fax: 785-379-0508**