

**Business Office**  
**3219 N. MAIN**  
**BAYTOWN, TX 77521**



**PHONE: 281-428-2209**  
**FAX: 281-422-0532**

SEND COMPLETED FORM TO:  
[accounting@batescc.com](mailto:accounting@batescc.com)

**APPLICATION FOR ACCOUNT**

This application must be completed in full and signed by a principal officer or owner of your company.

Please indicate the payment terms you are requesting:

**Business Information**

Legal Name: _____		DBA Name: _____	
Service / Ship to Info:		Billing Address Info:	
Contact Name	Contact Name	Contact Name	Contact Name
Contact Phone	Contact Phone	Contact Phone	Contact Phone
Street	Street	Street	Street
City, State, Zip	City, State, Zip	City, State, Zip	City, State, Zip
Your business product or service:		Proprietorship S.S.#: _____	
		or Partnership S.S.#: _____	
		or Corporation F.I.N# _____	

**Principals (Names of officers or owners)**

Name _____	Position: _____	S.S.# _____
Name _____	Position: _____	S.S.# _____

**Business History**

Prior Business Name: _____	Date Started _____
Current Business Name: _____	Date Started _____
Will your purchase from us be sales tax exempt? <input type="text"/> <input type="button" value="v"/>	Sales Tax # _____

**Bank Reference**

Bank Name _____	Bank Officer _____
Street _____	Account # _____
City/State/Zip _____	Phone# _____

**Trade References - Please List 3**

Business _____	Phone# _____
Address _____	Fax# _____
Contact Name _____	
Business _____	Phone# _____
Address _____	Fax# _____
Contact Name _____	
Business _____	Phone# _____
Address _____	Fax# _____
Contact Name _____	

**Your Billing Instructions/Profile**

Do you require a Purchase Order Number?

Please list any items that must be presented to you with our invoice for payment **(no statement will be mailed)**:

Other instructions:

The undersigned hereby authorizes Bates Custom & Collision, Inc. to investigate the bank/trade references listed for the purpose of obtaining an account. A service charge of 1 1/2 % shall be charged on all past due accounts. All payments are due on the 10th of the month. Past due accounts will be placed on credit hold until all past due invoices are paid.

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_