

 <p>Main Office: 16900 Chestnut St., City of Industry, Ca 91748 Remittance Address: PO Box 1111 La Puente, CA 91749-1111 Phone: (626) 854-4500 Fax: (626) 854-4699</p>		_____ Sales Person _____ Branch/Sales Manager _____ Existing Customer Number https://www.us-ac.com	<p>EXPRESS PROCESSING FOR A COD ACCOUNT</p> <p>If you want credit terms or job basis credit, please complete our "Application for Credit"</p> Credit Manager: _____ Special Instructions: _____ Date: _____ Approval/CC: _____	
Company Name		Phone:		
Address	City/Zip	Fax:		
Billing Address (if different form above)				
This Location is <input type="checkbox"/> Main office <input type="checkbox"/> Branch office		Name and Address of Parent Company (if applicable)		
Email Address:				
Would you like to receive invoices and statements via email or fax? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Business Entity is <input type="checkbox"/> Corporation <input type="checkbox"/> LLC/LLP Contractor <input type="checkbox"/> Partnership <input type="checkbox"/> Sole ownership License No.				
**List Name(s) of Corporate Officer(s), Partner(s), or Owner ** (REQUIRED)		Please provide your Social Security # & Driver's license # for identity and security purposes.		
Position	Name	Home Address/City State/Zip	DL#	The last 4 digits of your SS #
Years in Business	Years at Present Location	<input type="checkbox"/> Own <input type="checkbox"/> Lease	Average Monthly Sales	Number of Employees
Business Mix: Residential New Construction _____% Custom Homes _____% Residential-Add On/Change-out _____% Commercial-New Construction _____% Commercial-Tenant Improvement _____%				
Sales Tax : <input type="checkbox"/> Taxable <input type="checkbox"/> Tax Exempt		In order for us to sell you any merchandise on a tax exempt basis, we must have a fully filled out and signed resale card		
Purchase order required? <input type="checkbox"/> Yes <input type="checkbox"/> No				
EPA Clean Air Section 608	Technician's Name:		Please provide us with a copy of your certification card or technician(s) certification card(s)	
	Certificate Number:			
ACCOUNT AGREEMENT AND TERMS OF SALE				
The undersigned hereby applies to US Air Conditioning Distributors, LLC (herein referred to as USACD, LLC) for a COD account. USACD, LLC shall have the right to charge, if payments are not made pursuant to the terms of USACD, LLC, a liquidated damage charge (commonly known as a late charge) of 1 ½ % per month will be billed to your account. Upon a change in principals or the legal identity of the company, applicant will give written notice within 15 days to the credit department of USACD, LLC. USACD, LLC Terms and Conditions of Quotation and Sales (Legal / Terms and Conditions of Use *) are incorporated herein and binding upon principles and guarantors as Conditions of Sale. If credit is extended, customer by accepting the extension of credit agrees to be bound by the terms of USACD, LLC <i>Account Agreement and Terms of Sale</i> contained in their Application for Credit Account (copy is available upon request). The limits of credit extended maybe adjusted by USACD LLC at any time and on any basis it deems appropriate with or without notice to Customer. Should suit or collections be instituted to collect any debts of the undersigned, the undersigned agrees to pay all actual costs of collection and attorney's fees.				
Date: _____		_____ Signature (officer or principal only)		

* Terms & Conditions <https://us-ac.com/USACD-Terms-and-Conditions-of-Quotation-and-Sales.pdf>