



**Main Office**  
10201 West 49th Avenue  
Wheat Ridge, CO 80033  
303.423.9660  
800.284.0400  
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# Cash Account Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address (if different than billing address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Contact: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Check all that apply:

Licensed Plumber: \_\_\_\_\_ # \_\_\_\_\_

Licensed Heating Contractor: \_\_\_\_\_ # \_\_\_\_\_

Licensed Service Contractor: \_\_\_\_\_ # \_\_\_\_\_

Licensed Contractor: \_\_\_\_\_ # \_\_\_\_\_

Other: \_\_\_\_\_

## For Branch Use Only - Do Not Complete Below Information

Account: \_\_\_\_\_

Salesman: \_\_\_\_\_

Taxable: YES NO

Sales Tax Certificate #: \_\_\_\_\_ (attach copy of certificate)

Manager Approval: \_\_\_\_\_

Discount Code: \_\_\_\_\_