

Business Type:  Sole Proprietorship  Partnership  Corporation  LLC State \_\_\_\_\_

Federal Tax ID # (FEIN) \_\_\_\_\_ D and B Number \_\_\_\_\_

State Tax ID # and exemption status: \_\_\_\_\_  
(Copy of sales and use tax exemption certificate / resale certificate is required with application)

Company Name \_\_\_\_\_

Is this Company part of a controlled group? If so, what is the parent, or group belonging to? \_\_\_\_\_

Full Billing Address \_\_\_\_\_

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

Full Shipping Address \_\_\_\_\_

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

Requested Credit Line \$ \_\_\_\_\_ Anticipated Monthly Purchases \$ \_\_\_\_\_ Years in Business \_\_\_\_\_

Name and Address of Individuals or Partners or Name/Title/Phone Numbers of Corporate Officers:

1. \_\_\_\_\_
2. \_\_\_\_\_

**PERSON(S) TO CONTACT REGARDING PURCHASE ORDERS AND INVOICE PAYMENTS**

Name	Title	Address	Phone No.	Email

**BANK REFERENCES**

Bank Name/Account Number	Contact/Title	Phone No./Fax No.	Email
1. _____			
2. _____			

**TRADE REFERENCES**

Company Name and Contact/Title	Address	Phone Number/ Fax Number	Email
1. _____			
2. _____			
3. _____			
4. _____			

Financial Statements Available?  Yes  No *If yes, please attach.*

THE UNDERSIGNED APPLICANT CERTIFIES THAT ALL INFORMATION ON THIS APPLICATION IS COMPLETE AND ACCURATE AND AUTHORIZES PARKER REED LIGHTING AND MANUFACTURING TO VERIFY INFORMATION BY USE OF CREDIT REPORTING AGENCIES AND/OR BANK AND TRADE REFERENCES LISTED ABOVE. APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY, AND WILLINGNESS TO PAY ALL INVOICES IN ACCORDANCE WITH PARKER REED LIGHTING AND MANUFACTURING'S PUBLISHED TERMS AND CONDITIONS. PARKER REED LIGHTING AND MANUFACTURING'S STANDARD TERMS ARE NET 30 DAYS FROM INVOICE DATE UNLESS OTHERWISE STATED. PARKER REED LIGHTING AND MANUFACTURING MAY SUSPEND TERMS IN THE EVENT OF PAST DUE INVOICES. FOR ADDITIONAL TERMS AND CONDITIONS, SEE <https://parkerreedlighting.com/wp-content/uploads/PRLM-Terms-and-Conditions-May-28-2022.pdf>

Applicant Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Parker Reed Office Use Only:

Notes on Account:  Approved  
 Disapproved – Reason: \_\_\_\_\_  
\_\_\_\_\_