

**CONFIDENTIAL
INFORMATION FORM**

COMPANY INFORMATION

Company Name:		
Federal ID:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Business Type:	How long?	
Accounts Payable Contact:		
SIC Code:	Dun's Number:	
Resale Number:	Tax Exempt Certificate: Y N (Circle One)	If yes please enclose a copy of your certificate

AUTHORIZED PERSONNEL INFORMATION

Authorized Buyer(s):		
Authorized Pick Up Personnel (if applicable):		
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:		
Authorized Buyer(s):		
Authorized Pick Up Personnel (if applicable):		
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:		
List any additional personnel.		
Amount of Credit Requested: \$		

TRADE REFERENCES

Company Name and Address:		
Contact:	Phone:	Fax:
Company Name and Address:		
Contact:	Phone:	Fax:
Company Name and Address:		
Contact:	Phone:	Fax:

BANK INFORMATION

Bank Name:		
Address:		Contact:
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:

I authorize HEMCO Corporation to verify the information provided on this form. Please allow two weeks to receive reference responses.

Signature of applicant	Date
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TERMS: Net 30 days from date of invoice. A finance charge of 1 ½% will be assessed monthly after 30 days. Also, prepayment is accepted with the following forms: Master Card, Visa, American Express, Letter of Credit and Wire Transfers. We will also consider and negotiate Project Specific Terms. No COD.

FREIGHT: FOB Factory. Freight will be charged collect or prepaid and add to invoice. Pick up is available by appointment at HEMCO Corporation, 711 South Powell Road, Independence, MO 64056.