



Mon-Valley Office Equipment

Phone:724-483-5313

Fax:724-483-0504

Easy Account Set-up

Please mail completed application to: Mon-Valley Office Equipment - 17 McKean Ave. - Charleroi, PA 15022

Section 1 - Basic Set-up Required of all new accounts

Company Name _____
 dba/if applicable _____
 Billing Address _____
 Shipping Address _____

(if there are additional shipping locations or instructions please include info)
 Phone (_____) _____ Fax (_____) _____

President and/or Owner _____

Are Monthly statements required? Y/N _____
 Are Purchase Orders required? Y/N _____
 Are Purchases taxable? Y/N _____
 (if not, you must attach a tax exempt certificate)

Years in Business _____
 Years under present management _____
 Number of Employees _____

Name	Phone w/Ext	Email
AP Contact		
Supplies Contact		
IT Contact		
JanSan Contact		

Section 2 - Credit Card Information - Visa & Mastercard only

Name on card _____ Billing Address of card: _____
 Card Number _____ Expiration _____
 Authorized Signature _____

Please check one:

- OPTION A: Bill all purchases to this card – Congratulations! You’ve finished opening your account!
- OPTION B: Please open an account immediately using this card only as collateral security
- OPTION C: Please open an account using this card only as temporary collateral security – Must complete Section 3
- OPTION D: Please open an account using credit information supplied below and obtained from credit bureau

Section 3 - To Open A Charge Account - Please complete if Option C or D above is chosen.

Company	Address	Phone w/Ext	Contact
Trade Ref 1			
Trade Ref 2			
Trade Ref 3			

Bank Name _____ Bank Phone (_____) _____
 Contact _____ Account Number _____
 Dun & Bradstreet Number _____

Credit Check General Agreement

As an inducement to grant credit, the Applicant warrants that the information submitted is true and correct. Mon-Valley Office Equipment is authorized to investigate trade and bank references, and credit reporting repositories. The Applicant further releases all banks, businesses, and persons to furnish any and all information requested by Mon-Valley Office Equipment or its representatives, by telephone, or written correspondence whichever Mon-Valley Office Equipment requests.

I have read, understand and agree to the terms and conditions as set forth on this form.

Signature _____ Title _____ Date _____
OFFICER OF COMPANY OR AUTHORIZED REPRESENTATIVE

Please print name _____

(Interest accrues at the rate of 1.5% per month on all unpaid balances)