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## Tompkins New Customer Credit Application

Please complete this form to request credit terms with Tompkins Industries. Upon submission, a Tompkins representative will contact you for confirmation. Please type or print legibly – incomplete applications will not be accepted. Tompkins utilizes a third party credit service to check credit history. By submitting this application you authorize Tompkins to use this service to determine your eligibility for an open account.

### Contact Information

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

### Business Information

Type of business (**circle one**):      Dealer/Distributor      MRO      OEM      End User      Other

Annual adapter/fitting purchases (**circle one**):      Under \$1K      \$1K - \$10K      \$10K - \$50K      \$50K or more

Number of locations \_\_\_\_\_ Website \_\_\_\_\_

Current primary fitting source \_\_\_\_\_

Current primary hose source \_\_\_\_\_

### Billing Information

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Accounts Payable Contact (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_

Customer wants invoicing delivered via: (**circle one**)      Email      Fax

Email address for invoicing purposes: \_\_\_\_\_

### Shipping Information – Check if Same as Billing

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_



## State Sales Tax

If your company is tax exempt, please provide your tax exemption certificate. We accept multi-jurisdiction certificates as well as streamline exemption certificates. Please make sure that the certificate is signed and dated as failing to have that information makes the certificate invalid. Any company that does not provide an exemption certificate will be charged sales tax.

## Additional Information

Purchasing Contact Name (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_

Purchasing Contact Email \_\_\_\_\_

How did you hear about Tompkins? \_\_\_\_\_

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### *For Internal Tompkins Office Use*

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

Catalogs sent: \_\_\_\_\_

Multiplier given: \_\_\_\_\_

Info taken by: \_\_\_\_\_