



# New Customer Application

Pipe Lining Supply, Corp.  
Phone: 1-888-354-6464  
Fax 714-630-6026  
office@pipeliningsupply.com

## Company Details

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Is this address:

\_\_\_\_\_ Business Address  
\_\_\_\_\_ Residential Address

## Account Details & Invoicing Information

Contact Name: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
Billing City: \_\_\_\_\_  
Billing State: \_\_\_\_\_ Billing Zip: \_\_\_\_\_  
Business Telephone: \_\_\_\_\_  
Contact Cell Phone: \_\_\_\_\_  
Contact Email: \_\_\_\_\_

Preferred Payment Method

\_\_\_\_\_ Cash  
\_\_\_\_\_ Credit/Debit Card

## Confirmation/Signing

By signing below, we certify that the information submitted on this application is true and correct to the best of our knowledge. We authorize Pipe Lining Supply, Corp. to make all inquiries necessary for action on this application for credit and hereby indemnify Pipe Lining Supply, Corp., and its agents from any liability resulting from their credit survey. If approved, we agree to abide by the terms and conditions set by Pipe Lining Supply, Corp., and understand that Pipe Lining Supply, Corp., may change or revoke those terms and conditions at any time. Additionally, we agree to pay all reasonable costs of collection, including but not limited to, attorney's fees, court costs, expenses and interest from date of invoice should Pipe Lining Supply, Corp., be forced to take legal action in effort to collect unpaid invoices.

(Print) Name and Title: \_\_\_\_\_ Date: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Signature: \_\_\_\_\_