

**Jugenheimer Industrial Supplies, Inc**

6863 Commerce Drive Hubbard, Ohio 44425

Phone: 330.534.8171 Fax : 330.534.8179 TOLL Free: 800.533.8171

Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Billing Add. \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_  
Ship Add. \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_  
Business Ph. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Ph. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Fax # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ 800 # (800) \_\_\_\_\_ - \_\_\_\_\_

**Accounts Payable Fax # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ We fax our invoices.**  
I understand that by providing the fax number(s) above, on behalf of our company or organization above, I am authorized to and hereby consent for our company/organization to receive faxes sent by or on behalf of Jugenheimer Ind. Supplies, Inc.

E-Mail Address \_\_\_\_\_ Cell Ph. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Date Incorp. or Business Started \_\_\_\_/\_\_\_\_/\_\_\_\_ Fed. Id # \_\_\_\_\_

Operates as: Corp \_\_\_\_ Individual \_\_\_\_ Partnership \_\_\_\_

Taxable: Yes \_\_\_\_ No \_\_\_\_ If tax exempt, must attach certificate.

Pur. Mgr. \_\_\_\_\_ AP. Mgr. \_\_\_\_\_

**NAME OF PRINCIPALS OR PARTNERS: HOME ADDRESSES & PHONE NUMBERS**

Name \_\_\_\_\_ Name \_\_\_\_\_  
Add. \_\_\_\_\_ Add. \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**NAME OF CORPORATION OFFICERS:**

Pres. \_\_\_\_\_ VP. \_\_\_\_\_  
Sec. \_\_\_\_\_ Trea. \_\_\_\_\_  
Bank Name \_\_\_\_\_ Acct. # \_\_\_\_\_  
Bank Phone (\_\_\_\_) \_\_\_\_\_ Contact \_\_\_\_\_

A 2% monthly service charge is added to accounts over 30 days. A charge of \$20.00 is for NSF checks returned to JISI. (Both which you agree to pay). You agree to pay any collection and/or attorney fees if account has to be sent in for collection. You agree to submit to personal jurisdiction in the State of Ohio. In consideration of the sale of material to the above business I personally as an individual, guarantee payment of all purchases made on behalf of the above named business.

**Both parties agree, a signed faxed correspondence is contractually binding.**

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Print Name \_\_\_\_\_

With out a signature NO CREDIT will be issued. This must be mailed or faxed to us.

CREDIT REFERENCE

1 Name \_\_\_\_\_ Ph. (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Add. \_\_\_\_\_ Fax (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

2 Name \_\_\_\_\_ Ph. (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Add. \_\_\_\_\_ Fax (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

3 Name \_\_\_\_\_ Ph. (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Add. \_\_\_\_\_ Fax (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

4 Name \_\_\_\_\_ Ph. (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Add. \_\_\_\_\_ Fax (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Below credit information filled in by JISI credit department.

Sold Since	Credit Limit	Pay History	Rating	Person Spoke to
1_____	_____	_____	_____	_____
2_____	_____	_____	_____	_____
3_____	_____	_____	_____	_____
4_____	_____	_____	_____	_____

Credit Approved by \_\_\_\_\_ Credit Limit \$\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

BLANKET CERTIFICATE OF EXEMPTION

The undersigned hereby claims exemption to purchases of tangible personal property from JUGENHEIMER IND. SUPPLIES, INC. of Hubbard, Ohio on and after \_\_\_\_/\_\_\_\_/\_\_\_\_ and certifies that this claim is based upon the purchaser's proposed use of the items purchased, the activity of the purchaser, or both, as shown hereon:

\_\_\_\_\_ Resale, in the regular course of business, in the form of tangible personal property.

\_\_\_\_\_ Incorporating the same, as a material, ingredient or component part, into tangible personal property product for sale.

\_\_\_\_\_ Other authorized exempting describe):\_\_\_\_\_

This certificate shall be considered a part of each order given by purchaser from this date hereof, unless such order shall otherwise specify. This certificate shall continue in full force and effect unless and until revoked in writing by the purchaser. The purchaser understands and agrees that if it uses any property purchased tax-free under this certificate in any manner which would not exempt the sale of tax, it becomes the user of consumers property, and as such assumes liability for and undertakes to pay the tax and, the interest and penalty thereon, if any.

License No. \_\_\_\_\_ Fed. ID # \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Co. Name \_\_\_\_\_ Signature \_\_\_\_\_

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