



**ShieldsPride.com**  
**P.O. Box 6752**  
**Reading, PA**  
**19610-9998**

**TOLL FREE #'s**  
**Phone:(866) 235-4500**  
**Fax:(866) 806-1117**

**OPEN ACCOUNT INFORMATION FORM (Payment is due 15-30 days after receipt of goods)**

Please complete the following form and return it to us by fax or by U.S. mail. We cannot accept credit orders until we have received and approved your application.

Check one of the following reasons your organization is applying for credit:

1. \_\_\_\_\_ You are a legally organized fire-fighting, emergency response organization and/or law enforcement organization.
2. \_\_\_\_\_ You are a government entity which buys fire-fighting, emergency response and/or law enforcement equipment and supplies.

Your branch of government is (check one: \_\_\_\_\_ federal, \_\_\_\_\_ state, or \_\_\_\_\_ local).

Legal name of your organization: \_\_\_\_\_

Federal identification number (FEIN) of your organization: \_\_\_\_\_

State sales tax or retailer's number: State \_\_\_\_\_ Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Email address: \_\_\_\_\_

Billing Address:

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Business hours: \_\_\_\_\_

Shipping Address:

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Person responsible for approving purchases: (print name) \_\_\_\_\_

Title: \_\_\_\_\_ (signature) \_\_\_\_\_

Person responsible for approving payments: (print name) \_\_\_\_\_

Title: \_\_\_\_\_ (signature) \_\_\_\_\_

Does your organization require the following (please answer "yes" or "no")?

Purchase orders: \_\_\_\_\_ Vouchers: \_\_\_\_\_

If the answer to either of the above items is "yes", we must have a copy of the document before we can process your order.

Please list two credit references, which we may contact (if your organization is a "retailer/dealer"; we require at least five trade references and a bank reference). Include company name, address, and contact person, telephone number and fax number.

\_\_\_\_\_

Thank you for your cooperation. This information will be used to protect both you and us from unauthorized purchases.