

ACCOUNT APPLICATION
Fax to: 214-905-2057

Type of Account applying for:

Open Account /Amt: _____ / COD-Cash Acct: _____

OR : Credit Card Account:

Please Circle one

Card Type: Visa MC Disc AM-EX

Card Holder: _____

Card Number: _____

Expiration Date: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name & Title: _____

Phone: _____ Fax: _____

Alt Phone or Cell: _____

E-mail: _____

Federal ID / SS Number: _____

Shipping Address: *(If different from billing)*

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Please include additional ship to addresses on separate sheet

SUPPLIER REFERENCES

1. Name: _____

Acct Number: _____ Fax#: _____

2. Name: _____

Acct Number: _____ Fax#: _____

3. Name: _____

Acct Number: _____ Fax#: _____

Tax Exempt Information

Tax Exempt / Resale Certificate must accompany application.

Sales Tax will be charged until proper form is submitted

Copies of permits are not acceptable

Preferred Invoice delivery method: (Please circle one)

Emailed _____ **Faxed** _____ **Mailed** _____

View on website 24/7 _____

APD Shipping Branch Location: _____

Parts to be: (Please circle one) **Will Call** or **UPS**

Do you require Purchase Order Numbers? **Yes** **No**

Do you accept Backorders? **Yes** **No**

Would you like access to APDepot's Website? **Yes** **No**

If so

Login (*email address*): _____

Password (*6 digits or more*) _____

Management Company: (If applicable)

Name: _____

Contact Person: _____

Phone: _____

Terms and Conditions

Net 30 days from invoice or Net 10 from statement date.

1 1/2% (18% per year) will be charged on all balances over 60 days. If the account is referred for collections, the undersigned agrees to pay all cost including but not limited to collection fees and attorney fees.

Signature: _____ Date: _____

Personal Guarantee

The undersigned hereby agrees to assume personal liability and responsibility for payment of the corporations accounts in the event that payment for said debts are turned over for collections or presented for payment in a court of law.

Signature: _____

Title: _____ Date: _____
(Owner / Officer)

****Must be signed to process for open accounts****

FOR INTERNAL USE ONLY: SIC Code: _____ Schedule: _____ Branch (Ship): _____ Delivery: _____

QUESTIONNAIRE

How did you hear about us? _____

How many years in business? _____

Type of business? _____

Total parts purchased per month? (\$) _____

What % of your business is warranty? _____

Who is your current supplier? _____

How often do you order parts? _____

What brands are you authorized to perform warranty service(s) on? _____

Are there any special request(s) from your parts distributor? _____

Headquarters

4754 Almond Ave
Dallas, TX 75247
(214) 631-4343
(800) 527-2343
F (214) 634-7929

East Dallas

7927 Carr Street
Dallas, TX 75227
(214) 381-7500
(800) 338-1200
F (214) 381-2196

Fort Worth

2608 Carson Street
Haltom City, TX 76117
(817) 831-4340
(800) 642-6420
F (817) 831-4191

San Antonio

2115 Danbury Street
San Antonio, TX 78217
(210) 829-1772
(800) 622-1247
F (210) 829-1797

Houston

1224 N Post Oak Rd, #200
Houston, TX 77055
(713) 686-6860
(800) 505-8455
F (713) 686-6861

Lubbock

6035 45th Street, #A
Lubbock, TX 79407
(806) 792-7277
(800) 444-0686
F (806) 792-0832

Albuquerque

3340 Princeton N.E.
Albuquerque, NM 87107
(505) 884-0570
(800) 444-4769
F (505) 883-0614

Phoenix

3212 W Thomas Rd
Phoenix, AZ 85017
(602) 973-6868
(800) 590-5908
F (602) 973-8113

Mesa

2240 W. Broadway Rd., #104
Mesa, AZ 85202
(480) 969-1225
(800) 815-8511
F (480) 461-0244

Tucson

6237 E. 22nd Street
Tucson, AZ 85711
(520) 748-2222
(800) 888-4750
F (520) 790-6666