



## NEW ACCOUNT APPLICATION

PO Box 30666  
Charlotte NC 28230  
704-526-1890  
www.buildingpointsoutheast.com

BUSINESS INFORMATION			
Legal name of Company:			
Billing address:			
City:	State:	ZIP Code:	
Phone:	Fax:		
Shipping address:			
City:	State:	ZIP Code:	
Phone:	Fax:		
Type of business:	How long in business:		
P.O. # required?	Tax Exempt?	(If yes, send certificate w/application)	NAICS CODE -
DUNS#:	Credit Line Requested:		
CONTACT INFORMATION			
<u>Corporate Principals</u>			
Name:	Position:		
Name:	Position:		
Name:	Position:		
<u>Persons authorized to use account</u>			
Name:	Position:	Cell:	
Name:	Position:	Cell:	
Name:	Position:	Cell:	
Purchasing agent:	Email:		
Accounts payable contact:	Email:		
BUSINESS/TRADE REFERENCES			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
ELECTRONIC INVOICING			
BuildingPoint SE is doing our part for the environment by offering electronic invoicing. We encourage you to participate by selecting a method below:			
INVOICES	Email _____	Fax _____	Email/fax#:
STATEMENTS	Email _____	Fax _____	Email/fax#:
FOR INTERNAL USE		AGREEMENT	
Salesperson:	I understand that purchases from BuildingPoint Southeast, LLC are payable 10 days after the end of the month in which they are made and agree to maintain my account on that basis.		
Approved by:			
Credit line requested:	<b>SIGNATURE:</b>		
Opened by:	Title:		
Customer #:	Date:		

