

# Southeast Diesel inc.

Southeast Diesel Inc  
2105 S. Orchard Knob Ave.  
Chattanooga, TN 37404  
Ph: 423-622-1006  
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E-mail: office@sediesel.com

Please Print

Date: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of Officer or Owner: \_\_\_\_\_ Title: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

At Present Location Since: \_\_\_\_\_ Year Established: \_\_\_\_\_

Do You Require Purchase Order Numbers? Yes \_\_\_\_\_ No \_\_\_\_\_

Are You Tax Exempt? Yes \_\_\_\_\_ No \_\_\_\_\_ Sales Tax # \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_

Have you or any principles filed bankruptcy? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, When? \_\_\_\_\_ Company or Name filed under: \_\_\_\_\_

Payables Manager: \_\_\_\_\_ Phone # \_\_\_\_\_ Ext# \_\_\_\_\_

## References

Bank: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

1. Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ Email: \_\_\_\_\_

Terms are Net 10th. A Finance Charge of 1.5% per month will be added to all unpaid balances. Credit customers Agree to pay reasonable Attorney & Collection Fees in the event Collection Process becomes necessary for delinquent accounts. **Authorized signature required for release of credit information and agreement to terms & conditions for open account.**

Signed: \_\_\_\_\_ Title: \_\_\_\_\_