

Credit Application

Corporate Office
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Fax: (905) 830-0512
canadasales@goodwaterwarehouse.com

The Information provided is for the sole purpose of obtaining credit and/or account qualifications for Good Water Warehouse, Inc.

Company Name: _____

Contact Person: _____

BILLING ADDRESS:

Company Name: _____

Address: _____

City: _____ **State/Province:** _____

Zip/Postal Code: _____ **Country:** _____

Phone: _____

Fax: _____

SHIPPING ADDRESS:

Company Name: _____

Address: _____

City: _____ **State/Province:** _____

Zip/Postal Code: _____ **Country:** _____

Phone: _____

Fax: _____

Engaged in Business Selling: _____

Type Business: ☐ Sole Owner ☐ Partnership ☐ Corporation ☐ LLC **Date Est:** ____/____/____

California Resale Number (If applicable): _____

Business Bank Branch: _____ **Account #** _____

Contact Person: _____ **Phone:** _____

Address: _____ **Fax:** _____

City: _____ **State/Province:** _____ **Zip:** _____

TRADE REFERENCES:

Name: _____ **Email:** _____ **Phone:** _____ **Fax:** _____

Address: _____ **City:** _____ **State/Province:** _____ **Zip:** _____

Contact Person: _____

Name: _____ **Email:** _____ **Phone:** _____ **Fax:** _____

Address: _____ **City:** _____ **State/Province:** _____ **Zip:** _____

Contact Person: _____

Name: _____ **Email:** _____ **Phone:** _____ **Fax:** _____

Address: _____ **City:** _____ **State/Province:** _____ **Zip:** _____

Contact Person: _____

Authorized Signature: _____ **Date:** ____/____/____

In consideration of extending credit at my request, I (the undersigned) hereby personally guarantee *Good Water Warehouse, Inc.* payment of any obligation of *Company Name* and I hereby agree to bind myself for payment of any unpaid debt including finance charges, shipping & handling and collection costs and/or attorney fees whenever the above applicant shall default on same. It is understood that this guarantee shall be continuing and irrevocable for indebtedness of *Company Name*. I also acknowledge receipt of and agree to all "terms and conditions" of *Good Water Warehouse, Inc.* (page 7 of catalog).

Authorized Signature: _____ **Date:** ____/____/____

Print Name: _____ **Title:** _____ **SSN:** _____

CREDIT CARD AUTHORIZATION (OPTIONAL): I hereby authorize Good Water Warehouse, Inc. to charge the following credit card(s) for any amount that is above our credit limit and/or for any invoice that is past due.

Credit Card: VISA/Master Card #: _____ - _____ - _____ - _____ **Exp. Date:** ____/____ **CVC:** _____

Print name: _____

Signature: _____ **Date:** ____/____/____