



SEWELLDIRECT.COM

ACCOUNTING

SEWELL DEVELOPMENT CORPORATION
3877 NORTH 200 EAST
PROVO, UT 84604
(801) 226-3794

Please fax this to: (801) 226-8289
or email: accounting@sewelldev.com

WAREHOUSE/CUSTOMER SERVICE

SEWELL DIRECT
3877 N 200 E.
PROVO, UT 84604
(800) 709-1345

BUSINESS ACCOUNT APPLICATION (NET 30 TERMS).

PLEASE NOTE THAT WE ONLY EXTEND CREDIT TO COMPANIES WITHIN THE USA.

ALL CHECK PAYMENTS MUST BE FROM A US BANK

GENERAL INFORMATION

NAME & TITLE, COMPANY NAME, ADDRESS, CITY, STATE, ZIP, EMAIL, PHONE, FAX, NUMBER OF EMPLOYEES (checkboxes for 1-10, 11-35, 36-100, 100-200, 200+)

TYPE OF COMPANY/ORGANIZATION (CHECK ALL THAT APPLY)

- checkboxes for END USER, RESELLER, RETAILER, DISTRIBUTION, OTHER, CONTRACTOR, INSTALLER, INTEGRATOR, VAR, INTERNATIONAL IMPORTER, MANUFACTURER, SCHOOL/NON-PROFIT, MILITARY/GOVERNMENT

ANTICIPATED OPENING ORDER

- checkboxes for \$0-100, \$100-1000, \$1000-5000, \$5000-20000, \$20000+

ANTICIPATED ORDERS PER YEAR

- checkboxes for 1-10, 10-25, 25-50, 50+

GROSS ANNUAL REVENUE

- checkboxes for \$0-1M, \$1M-10M, \$10M-100M, \$100M-500M, \$500M+

PRODUCT CATEGORIES YOU ARE INTERESTED IN (CHECK ALL THAT APPLY)

- checkboxes for A/V CABLE, DATA CABLE, BULK CABLE, PC TO TV CONVERSION, HOME THEATER CONNECTIVITY, USB ADAPTERS, RACKS & CABINETS, DIGITAL SIGNAGE, NETWORKING, VIDEO CAPTURE, COMPUTER COMPONENTS, WIRELESS, OTHER

HOW DID YOU HEAR ABOUT US?

- checkboxes for WORD OF MOUTH, SEWELL PRINT CATALOG, TRADE SHOW, ONLINE SEARCH, WEBSITE, TV COMMERCIAL, RADIO COMMERCIAL, THROUGH DISTRIBUTORS, OTHER

**ACCOUNTING/BILLING INFORMATION**

(ORDER WILL NOT BE PROCESSED UNTIL CUSTOMER'S ACCOUNTING DEPT. HAS CONFIRMED PURCHASE ORDER.)

CONTACT NAME & TITLE \_\_\_\_\_ EMAIL \_\_\_\_\_  
BILLING ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
FEDERAL TAX ID # \_\_\_\_\_ BILLING EMAIL \_\_\_\_\_  
INCORPORATED: Y / N STATE & YEAR \_\_\_\_\_ FAX \_\_\_\_\_  
SIGNATURE REQUIRED BY CONTROLLER: WE AGREE TO PAY NET 30 TERMS \_\_\_\_\_

**BANK & TRADE REFERENCES:** (BANK AND TRADE REFERENCES CAN BE SUBSTITUTED WITH YOUR STANDARD DOCUMENTATION IF APPLICABLE)

BANK \_\_\_\_\_ EMAIL \_\_\_\_\_  
BANK ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
ACCOUNT NUMBER \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
CONTACT PERSON \_\_\_\_\_ EMAIL \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
CONTACT PERSON \_\_\_\_\_ EMAIL \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
CONTACT PERSON \_\_\_\_\_ EMAIL \_\_\_\_\_

**APPLICATION MAY BE DELAYED IF TRADE REFERENCE FAX NUMBERS ARE OMITTED.**

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice. By signing this agreement, you agree to pay Net 30 Terms.
2. By submitting this application, you authorize Sewell Direct to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME AND TITLE \_\_\_\_\_