



### Cash Account Application

Please indicate your branch:  Omaha  Sioux Falls  Minneapolis  St Louis  Des Moines  Waterloo

Legal Name of Firm (Customer): \_\_\_\_\_

Owner Name: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Please Indicate the Type of Business:

- A/C & Heating  Institutional  Wholesale / Resale
- Apartment Maintenance  Building Maintenance  Other (Please describe): \_\_\_\_\_
- Refrigeration  International / Export \_\_\_\_\_

Please attach a copy of:  EPA Certification  Certification of Tax Exemption

**I understand that the information provided on this application is warranted to be true.**

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name (Printed): \_\_\_\_\_