



CARBON MONOXIDE DETECTOR  
"Safest way to catch a killer"

### Confidential Vendor Application

FOR OFFICE USE ONLY
Date _____
CR Limit _____

Corporation       Partnership       Sole Proprietor      Date Established \_\_\_\_\_

Repair Station       Wholesaler/Distributor       I.A. / A&P

Company \_\_\_\_\_ Contact Name \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ Website **http://** \_\_\_\_\_

Payment: COD VISA AMEX DISC MASTER      Name on the Card \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

*\*If billing address is different than above, please enter:* \_\_\_\_\_

#### To establish an open account, please fill out the following (1<sup>st</sup> shipment COD or credit card charge)

Type of Business \_\_\_\_\_

Owner \_\_\_\_\_ Accounts Payable Manager \_\_\_\_\_

Title \_\_\_\_\_ Buyer \_\_\_\_\_

Address \_\_\_\_\_ Bank \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ Phone \_\_\_\_\_

#### Trade References

Company \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

FAX \_\_\_\_\_ FAX \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_

<p>The above information is submitted by the undersigned for the purpose of establishing an open account with obtaining credit from CO Guardian LLC. And for payment by company check. The undersigned authorizes CO Guardian, or fully appointed agent of CO Guardian LLC. To verify the information here represented. The undersigned agrees that the term of payments required by CO Guardian are net 30 and that any acceptance of payments after this period by CO Guardian is not to be construed as change of terms. CO Guardian reserves the right to charge interest at the highest rate on past due amounts. The undersigned agrees to pay all attorney fees and other costs of expenses incurred by CO Guardian in the collection of any obligations of the undersigned pursuant hereto. This agreement may not be transferred or assigned without prior written consent of CO Guardian and shall be come effective when signed by CO Guardian.</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Officer or Other Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_