



Office Only

Account #:	ZH:
Terms:	Email:

Legal Business Name: _____

Business Name (if different): _____

Billing Address: _____

Ship to Address: _____

City, State, Zip: _____

Business Phone Number:		Fax Number:	
Company Email/User Name:			
Company Website:			
How did you hear about us:			

Contact Names (first,last)	Title	Email	Phone/Cell
Shipping Contact:			
Accounts Payable Contact:			

Can you Accept LTL or Common

Carriers for Delivery?

Do You Need A Lift-Gate for Delivery?

(*Charges May Apply*)

State Tax ID #: # _____

Tax Exempt:

(State of Nebraska must Sign and
Return Form 13)

Principle Business Activity:

(i.e. garden center, floral,
landscaping, etc.): _____ :

Would You Like to Receive

Emails From Craftware

Regarding Upcoming

events,sales,etc.? _____

Residential Deliveries are at least
double the freight

Date Started:

Email:

The Undersigned being an owner and/or stockholder of the above Business, hereby personally guarantees and agrees to pay any indebtedness due by this Business to Craftware or any principle represented by Craftware from whom this Business may purchase merchandise in the future.

I acknowledge that the following conditions will apply to all purchases from Craftware:

1. Title to any merchandise shall not pass to Business until the purchase invoice has been paid in full.
2. A 20% restocking charge shall be assessed on any account for merchandise not returned as a result of the seller's error.
3. A service or finance charge of 2% per month shall be assessed on any account balance not paid within 30 days of invoice date.
4. Should any account be delinquent and should it be referred to an attorney or collection assistance, a service charge of 33% of the account balance will be added to the account.
5. We accept cash, check and credit cards **(MasterCard, Visa, and Discover)** as forms of payment. Credit cards will be assessed a 3% balance transfer fee to any credit card transactions five business days after the invoice due date.
6. All initial orders placed with Craftware will be COD. If you fill out a credit application and become approved for payment terms, they will apply to subsequent orders provided your account remains in good standing.
7. A credit card must be kept on file and will be used for accounts with payment terms that are 30 days past due.
 - a. Credit Card Number: _____
 - b. Expiration Date: _____
 - c. CVC: _____
 - d. Zip Code (where credit card statement gets mailed) _____

Date: _____

Individual's Signature: _____

Printed Name: _____

**THE ORIGINAL SIGNED DOCUMENT MUST BE COMPLETED AND RETURNED BY FAX,
EMAIL OR MAIL SO THAT WE MAY PROCESS YOUR ACCOUNT.**



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