



F&Q PUMPS, INC.
A Pump and Motor Manufacturer

F&Q Pumps, Inc.
10617 E. Rush Street
S. El Monte, CA 91733
Tel: (626) 455-0884
Fax: (626) 448-9462
E-mail: sales@fqpumps.com
www.fqpumps.com

ACCOUNT SETUP APPLICATION FORM

Please **fax** to (626) 448-9462 or email PDF to sales@fqpumps.com. We look forward to working with you.

CONTACT INFORMATION

BUSINESS NAME:		
BUSINESS ADDRESS:		
CITY / STATE / ZIP:		
PHONE:	FAX:	WEB SITE:
PRESIDENT / OWNER:		E-MAIL:
FEDERAL TAX ID#	YEARS IN BUSINESS:	

PURCHASING INFORMATION:

PURCHASE CONTACT:	E-MAIL:
PHONE:	FAX:
ARE PURCHASE ORDERS USED? (Y/N)	PO REQUIRED? (Y/N)
SALES TAX ON PURCHASES? (Y/N)	RESALE CERT #
(Please attach Sales Tax Exemption/Resale Certificate or Multi-State Resale Certificate Form)	

ACCOUNTS PAYABLE INFORMATION:

A/P CONTACT:	E-MAIL:
PHONE:	FAX:
BILL TO ADDRESS (if different):	
CITY / STATE / ZIP:	
CREDIT LIMIT REQUESTED:	TERMS REQUESTED: (Standard Terms are Net 30 days)
IF YOU WOULD PREFER TO RECEIVE INVOICES ELECTRONICALLY VIA EMAIL -- PLEASE LIST E-MAIL ADDRESS(ES) & CONTACT(S) FOR E-INVOICES:	



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CONFIDENTIAL CREDIT APPLICATION & AUTHORIZATION

TRADE REFERENCES

COMPANY NAME:	PHONE:	FAX:
ADDRESS:		
CITY / STATE / ZIP:		
ACCOUNT OR CUSTOMER NUMBER:		

COMPANY NAME:	PHONE:	FAX:
ADDRESS:		
CITY / STATE / ZIP:		
ACCOUNT OR CUSTOMER NUMBER:		

BANK INFORMATION AND CREDIT INFORMATION RELEASE AUTHORIZATION

BANK:	PHONE:	FAX:
CONTACT:		
ADDRESS:		
CITY / STATE / ZIP:		
ACCOUNT OR CUSTOMER NUMBER:		

This is to authorize the bank to release our bank credit information to F&Q Pumps, Inc. for the purpose of setting up a business account, terms, and credit application.

OFFICER OR AUTHORIZED SIGNATURE

TITLE

DATE