

322 West Street ~ PO Box 566 ~ Uxbridge, MA 01569 TEL (508) 278-7700 FAX (508) 278-7711 1-800-225-7754 Toll Free

Date:		
you. If you have a prepared application	order for us to process your order we will need the ion that you wish to forward in lieu of this form process.	
Address:		
Telephone Number:	Alternate Phone:	
Bank Reference		
Bank Name:	P.O. Box:	
Street:C	ity:State:Zip:	
Telephone Number: ()	Account No: Contact:	<u></u>
Three Credit References		
	Telephone Number: () Fax Number: ()	
	Telephone Number: () Fax Number: ()	
3) Company:Address:	Telephone Number: () Fax Number: ()	<u></u>
In addition, if you are tax exempt,	please send a copy of your tax exempt certifica	ate.
Again, thank you for your order and	we hope this is the beginning of a long lasting bu	siness relationship.
Sincerely,		

Debby Secord Credit & Collections Dept.