



# JOB ACCOUNT FORM

Fax to: (713) 300-7779 Attention Credit Department

<b>JOB INFORMATION</b>	CUSTOMER NAME	
	JOB NAME	
	ADDRESS	CITY STATE ZIP CODE
	TELEPHONE NUMBER	CONTACT NAME
	CREDIT LIMIT REQUIRED / SPECIAL BILLING DIRECTIONS:	
<b>JOB TYPE</b>	PRIVATE SECTOR <input type="radio"/> <b><i>Please indicate the job type and complete the section below for all bonded jobs.</i></b> PUBLIC SECTOR <input type="radio"/> FEDERAL / STATE <input type="radio"/>	
<b>BONDING COMPANY</b>	BONDING FIRM NAME:	
	ADDRESS	CITY STATE ZIP CODE
	CONTACT PERSON:	TELEPHONE:
<b>GENERAL CONTRACTOR</b>	GC's NAME:	
	ADDRESS	CITY STATE ZIP CODE
	CONTACT PERSON:	TELEPHONE:
<b>OWNER'S INFORMATION</b>	OWNER'S NAME:	
	ADDRESS	CITY STATE ZIP CODE
	CONTACT PERSON:	TELEPHONE:
<b>SALES TAX</b>	SALES TAX TO BE CHARGED? YES _____ *NO _____	<b>*IF "NO" PLEASE COMPLETE AND SIGN A SALES TAX EXEMPTION CERTIFICATE AND RETURN WITH THIS APPLICATION. FIRST SOURCE IS REQUIRED BY LAW TO CHARGE TAX UNLESS WE HAVE A SIGNED EXEMPTION CERTIFICATE ON FILE.</b>

**Internal use only:**

Account opened: \_\_\_\_\_ Credit limit: \_\_\_\_\_

Salesperson: \_\_\_\_\_ Matrix / Contracts: \_\_\_\_\_ Terms: \_\_\_\_\_

**ALL JOB ACCOUNTS ARE SUBJECT TO FIRST SOURCE ELECTRICAL'S STANDARD TERMS AND CONDITIONS OF SALE AS SHOWN ON YOUR ORIGINAL ACCOUNT APPLICATION UNLESS OTHER TERMS ARE EXPRESSLY AGREED TO IN WRITING BY AN OFFICER OF FIRST SOURCE ELECTRICAL L.L.C.**