



**INDUSTRIAL AND MEDICAL GASES
WELDING SUPPLIES AND EQUIPMENT
1-800-826-0348**

360 EAST 8TH STREET
PO BOX 1522
GREELEY, CO 80632
(970) 356-7546
(FAX) 353-7786

8251 I-76 FRONTAGE ROAD
HENDERSON, CO 80640
303) 287-0662
(FAX) 287-4740

330 SOUTH 11TH AVENUE
STERLING, CO 80751
(970) 658-2382
(FAX) 744-3044

CASH ONLY CUSTOMER

*BUSINESS NAME OR INDIVIDUAL NAME		*DBA (DOING BUSINESS AS)	
*SHIP TO ADDRESS	*CITY	*STATE	*ZIP
*BILLING ADDRESS	*CITY	*STATE	*ZIP

CONTACTS

*OWNER	*TELEPHONE	FAX
	*EMAIL:	
*PUCHASING CONTACT	*TELEPHONE	FAX
	*EMAIL:	
*ACCOUNTS PAYABLE CONTACT	*TELEPHONE	FAX
	*EMAIL:	
WOULD YOU LIKE YOUR INVOICES EMAILED [] OR FAXED []		

TAX INFORMATION

*STATE TAX ID	*FEDERAL TAX ID	*TAXES THAT SHOULD BE CHARGED? STATE [] COUNTY [] CITY [] OTHER [_____]
TAX EXEMPT? YES [] NO [] MUST PROVIDE TAX EXEMPT FORM AND STATE SALES TAX LICENSE FOR TAX EXEMPTION		

I ACKNOWLEDGE AND AGREE THAT CYLINDER RENTALS WILL NOT BE ALLOWED ON A CASH ONLY CUSTOMER ACCOUNT.
CYLINDERS MUST BE PURCHASED IN FULL ALONG WITH THE ASSOCIATED CONTENTS BEFORE TAKING POSSESSION.
IN THE EVENT OF DEFAULT AND REFERRAL TO AN ATTORNEY OR COLLECTION AGENCY, I AGREE TO PAY FOR ALL COSTS OF
COLLECTION INCLUDING REASONABLE ATTORNEY'S FEES.

*PRINT	*SIGNATURE	*DATE
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BWS REP:

* INFORMATION THAT IS NECESSARY TO CREATE ACCOUNT

PLEASE SEND COMPLETED APPLICATION TO EMAIL: AP@BUCKEYEWELDINGSUPPLY.COM OR FAX: (970) 353-7786
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