

# SAFE WATER TECHNOLOGIES, INC.



## CONFIDENTIAL CUSTOMER APPLICATION

Company Name: \_\_\_\_\_

DBA (if any): \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Federal I.D. Number \_\_\_\_\_ E-Mail: \_\_\_\_\_

FEIN in the State of: \_\_\_\_\_ State Resale Number: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Shipping Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

"C" Corporation  "S" Corporation  LLC  Partnership  Other \_\_\_\_\_

Name of Owner(s): \_\_\_\_\_

President: \_\_\_\_\_ Purchasing Agent: \_\_\_\_\_

Vice President: \_\_\_\_\_ Accounts Payable: \_\_\_\_\_

Year Business Organized: \_\_\_\_\_ Was business started by the above officers or owners?  Yes  No

If no, how long present officers or owners in control?  less than 2 years  2 to 5 years  over 5 years

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_ Bank Representative: \_\_\_\_\_

\_\_\_\_\_ Checking Account Number: \_\_\_\_\_

\_\_\_\_\_

Business Description (Products and Services): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Industries Served:  Aquaculture  Manufacturing  Municipal  Commercial  Industrial  Pharmaceutical

Waste Water  Residential  Laboratory  Remediation  Government Organizations

Other \_\_\_\_\_

Types of Customers:  End Users  Dealers  Distributors  Assemblers  Manufacturers  Installers/Contractors

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_