



Wellhead Systems
 P.O. Box 129
 Hill City, KS 67642
 Telephone: 785-421-2255
 Fax: 785-421-2256
 Carrie@wellheadsystems.com

All information is to be filled out – Incomplete applications cannot be considered.

Please attach your current Tax Resale Certificate

Company Name: _____ **Phone No:** _____

Physical Address: _____ **Fax No:** _____

Mailing Address: _____ **Purch Contact:** _____

City/State/Zip: _____ **Acct. Controller:** _____

Email Address if you prefer to receive invoices via email: _____

Federal Tax No: _____ **Amount of Credit Requested:** \$ _____

TYPE OF OWNERSHIP: (Circle one) SOLE OWNERSHIP – PARTNER – LLC – CORPORATION (Branch or Subsidiary)

If Branch – Parent Co.: _____

OWNER OR OFFICER IN CHARGE: _____

TYPE OF PRODUCTS TO BE PURCHASED: _____

P.O. REQUIRED: Yes No

LENGTH OF TIME IN BUSINESS: _____ **Was this Firm previously part of another company?** Yes No

BANK REFERENCE: (Bank – Banker – Telephone Address) _____

CREDIT REFERENCE CURRENTLY EXTENDING THE HIGHEST CREDIT AND PERMISSION TO CONTACT THEM

List Company –

<p>1. _____</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>Phone _____ Fax _____</p> <p>_____</p> <p>Email _____ A/P Contact _____</p>	<p>3. _____</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>Phone _____ Fax _____</p> <p>_____</p> <p>Email _____ A/P Contact _____</p>
<p>2. _____</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>Phone _____ Fax _____</p> <p>_____</p> <p>Email _____ A/P Contact _____</p>	<p>4. _____</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>Phone _____ Fax _____</p> <p>_____</p> <p>Email _____ A/P Contact _____</p>

I warrant that the foregoing information is true and correct and realize it will be relied upon in the granting of future credit. If granted credit, I/we agree to pay all invoices within Net 30 days from date of invoice. It is agreed that my/our account may become C.O.D. if I/we fail to pay within stated terms.

Signed By: _____ **Title:** _____ **Date:** _____

For Office Use Only

Approved By: _____ **Date:** _____ **Credit Limit:** _____

Credit and Collections Representative

Wellhead Systems Freight Policy: Any order over \$7,500 net total within the continental U.S. will be freight allowed.



WSI
WELLHEAD SYSTEMS INC

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By submitting this application, you (the "Applicant") agree to the following terms, which are designed to ensure a mutually beneficial relationship between the Applicant and [Your Company Name] (the "Seller"): Payment is strictly Net 15 days from the date of the invoice. Early payment incentives may be offered at the Seller's discretion. If payment is not received within the specified term, a late fee of 5% of the outstanding balance will be applied immediately, with an additional 2% interest per month on the remaining overdue amount. The Seller reserves the right to determine, adjust, or revoke the credit limit at any time based on the Applicant's credit history, payment performance, and overall financial condition. The Seller may demand advance payment or collateral before executing any orders if the Applicant's creditworthiness is questionable. In the event of late payment, the Seller reserves the right to suspend delivery of goods and services until the account is settled. The Applicant will be responsible for all costs incurred by the Seller in collecting overdue amounts, including but not limited to collection agency fees, legal fees, and court costs. The Seller may conduct an annual review of the Applicant's credit status, which may lead to adjustments in terms and conditions. This agreement and any dispute arising from the relationship between the parties shall be governed by and construed in accordance with the laws of the jurisdiction where the Seller is located. The Applicant agrees to comply with all applicable laws and regulations in their transactions with the Seller. The Seller reserves the right to amend these terms at any time. Continued business following any amendment constitutes acceptance of the new terms by the Applicant.