

# GLT TOTAL OFFICE

2929 S COMBEE RD.  
LAKELAND, FL. 33803-7390  
863-686-1799 ext 235  
FAX:863-687-0816

<b>Customer Information and Credit Application</b>			
ACCOUNT NUMBER			
COMPANY NAME			
PHONE #	ext:	FAX #	
BILLING ADDRESS			
SHIPT TO ADDRESS			
CITY	STATE	ZIP CODE	
PURCHASING INFORMATION			
Person Respsible for Purchasing Decisions:			
Email Address:			
DO YOU HAVE A MANDTORY PO#	YES _____	NO _____	
ACCOUNT PAYABLE CONTACT:			
Phone/Ext Required:		Fax Required:	
HOW LONG IN BUSINESS?	NUMBER OF OFFICE PERSONNEL		
BANK NAME			
ADDRESS			
BANK CONTACT	PHONE #	EXT:	
TAX-EXEMPT? YES _____ NO _____ IF YES, FAX COPY OF DR-13, ANNUAL RESALE OR TAX			
EXEMPT CERTIFICATE, ISSUED BY STATE OF FLORIDA.			
<b>LIST OF PERSONNEL AUTHORIZED TO PURCHASE</b>			
1.	3.		
2.	4.		
<b>CREDIT REFERENCES COMPLETE NAME AND ADDRESS</b>			
NAME	ADDRESS		
CITY	STATE	ZIP CODE	PHONE#
NAME	ADDRESS		
CITY	STATE	ZIP CODE	PHONE#
NAME	ADDRESS		
CITY	STATE	ZIP CODE	PHONE#
DO YOU OWN OR LEASE YOU BUILDING?	OWN	LEASE	
Name of building owner			
address		phone	
OWNER/PRESIDENT (LOCAL APPROVING AUTHORITY)			
SIGNATURE		DATE	
SALESMAN		ROUTE#	
<b>GLT ACCEPTS ALL MAJOR CREDIT CARDS. CHECK ONE OF THE FOLLOWING</b>			
VISA____,MASTERCARD____,DISCOVER____,DINERS CLUB____,AMEX____, OTHER____			
<b>CARD NUMBER:</b>		<b>EXPIRATION DATE:</b>	