



# Customer Setup Form

Legal Name of Business	DBA	
Application Completed by	Title	FEIN #
Type of account: <input type="radio"/> Credit Card /Prepay <input type="radio"/> Credit with WAV \$ _____ <input type="radio"/> Lease Equipment		
Physical Address:		
City:	State:	Zip:

## Additional Company Information

Type of Business	Website URL	
Legal Form Under Which Business Operates:		
Corporation <input type="radio"/>	Partnership <input type="radio"/>	Sole Proprietorship <input type="radio"/> LLC <input type="radio"/>
If Division/Subsidiary, Name of Parent Company		In Business Since:
Company Principal Responsible for Business Transactions		Title
Address:	City:	State:    ZIP:    Phone:
Accounts Payable Contact	Email invoices to :	
Billing Address:	City:	State:    ZIP:    Phone:
Do you accept partial shipments and invoicing?    Yes <input type="radio"/> No <input type="radio"/> Fax: _____		
Do you want to restrict who has access to your online customer portal?    Yes <input type="radio"/> No <input type="radio"/>		
If yes, please specify name and email of authorized person for online customer portal access:		
Name _____	Email _____	

## Primary Bank Reference – Please complete if applying for open terms or lease

Institution Name		
Account #:	Borrowing Line available? Yes    No	Amount:
Address		
Phone	Banking Officer Name:	

## Please list 3 companies you have credit with if applying for open terms or lease

Company:	Company	Company
Contact:	Contact	Contact
Address	Address	Address
Phone	Phone	Phone
Email	Email	Email

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions and trade references listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. Applicant acknowledges that if credit terms are granted by WAV, terms granted will be Net 30, unless otherwise agreed upon in writing by an Officer of WAV, llc. I am legally authorized to bind "Customer", and have read, understand and agree to the terms and conditions of conducting business with WAV, llc. located at <http://www.wavonline.com/site/documents.html> customer further agrees to provide copies of sales tax exemption or resale certificates for States in which Customer is registered.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Fax your completed application to (630) 818-4451 or email it to [credit@wavonline.com](mailto:credit@wavonline.com)  
Please include a multistate tax form or a copy of your reseller certificate with this application. Questions? Contact WAV Credit or your Account Manager (630) 818-1000



2380A Prospect Dr., Aurora, IL 60502

Phone: 800.678.2419

Fax: 630.818.4452

Email: [info@wavonline.com](mailto:info@wavonline.com)

Web: [wavonline.com](http://wavonline.com)

To Whom It May Concern,

Please note, as of Jan. 1, 2021, WAV LLC is registered to collect and remit sales tax for the following states:

Alabama  
California  
District of Columbia  
Hawaii  
Indiana  
Louisiana  
Michigan  
Nebraska  
New York  
Ohio  
South Dakota  
Utah  
Wisconsin

Arizona  
Colorado  
Florida  
Idaho  
Iowa  
Maryland  
Minnesota  
Nevada  
North Carolina  
Oklahoma  
Tennessee  
Virginia  
Wyoming

Arkansas  
Connecticut  
Georgia  
Illinois  
Kentucky  
Massachusetts  
Mississippi  
New Jersey  
North Dakota  
Pennsylvania  
Texas  
Washington

Registered as of Feb. 1, 2021: New Mexico

Please provide any resale or exemption certificates prior to shipment to any of these locations.

Thank you,

WAV Finance Team