

Customer Setup & Credit Application

Pioneer Service Internal Use Only	
Approved Credit Limit \$	_____
Approved by	_____
Date of Approval	_____
Approved Terms	_____

Thank you for choosing to do business with Pioneer Service! In order to effectively set you up as a customer, get you approved for credit (or credit card) payment and ensure that we effectively communicate with you, please fill out this form and send it to Accounts@PioneerServiceInc.com or fax it to 630-628-9343.

Requested Credit Limit: _____

Credit Card Payments Only?

SECTION 1: CUSTOMER SETUP INFORMATION (Required)

Company Name: _____ Phone: _____

Billing Address: _____ Fax: _____

City, State, Zip: _____ Year Founded: _____

Accounts Payable Contact: _____ Email: _____

Corporation S Corporation Partnership Proprietorship D&B # _____

Principal(s)/Owner(s) for privately held companies: _____

Controller Name: _____

We prefer to be invoiced: Email _____ Mail Fax _____

SECTION 2: SHIPPING/PAPERWORK INSTRUCTIONS (Required)

Receiving Contact: _____ Email: _____

Email BOL & Packing Lists to: Receiving Contact Other email: _____

Preferred Shipping Method: UPS Acct # _____ FedEx Acct # _____

Ship Freight Collect orders via _____ for shipments over _____ pounds

Additional Shipping Instructions:



SECTION 3: TRADE REFERENCES (May provide on separate letterhead. Please consider supplying companies that do not provide machined parts as your trade references.)

Trade Reference (1)

Company Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ Email: _____

Trade Reference (2)

Company Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ Email: _____

Trade Reference (3)

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ Email: _____

Bank Reference

In the event that there are not sufficient trade references to qualify for a line of credit, a bank reference may be substituted. Contact us at accounts@pioneerserviceinc.com for a separate Bank Credit Reference Form.

SECTION 4: AGREEMENT (Required):

We certify that our firm is financially sound and warrant that all information provided by the Company in this application is true and accurate. We agree to pay Pioneer Service invoices according to approved terms. We understand that a service charge of 1.5% per month will be assessed on all past due invoices and we agree to pay such service charge when billed. We understand that paying via credit card beyond 10 days from the date of invoice will result in a 3% processing fee. All payments shall be made to Pioneer Service Inc. at 7335B Santa Fe Drive, Hodgkins, IL 60525.

We agree to "Terms and Conditions of Sale" as found on <https://pioneerserviceinc.com/CustomerTerms.pdf>.

SIGNATURE: _____ DATE: _____

TITLE: _____

PRINT NAME: _____

Please fax or email this completed form to us along with Trade References on company letterhead (if section 3 is not filled out).



For faster service and/or convenience, you may choose to pay by credit card. Please fax or email this form. If trade references are not provided, then a deposit of up to 100% of the order value may be required.

CREDIT CARD PAYMENTS

- We prefer to pay by credit card. A minimum 30% deposit plus any tooling charges, will be charged at the time of order acceptance and the balance at the time of shipment.
- Send receipts to (name) _____ at (email) _____

Name on credit card: _____

Billing Address (if different from above): _____

Credit Card Type: VISA MASTERCARD DISCOVER

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Note: Call 630-628-0249 x 2 if you prefer to provide some or all of this information via phone.

Note: This form will be destroyed once information is entered in PayTrace, our credit card processing company.