



Merfish Pipe & Supply

Since 1920

Master Distributor of Carbon Steel Pipe, Fittings & Flanges

1211 Kress St. · Houston, TX 77020 · PO Box 15879 · Houston, TX 77220-5879
Office Main Number: (713) 869-5731 · Accounting Fax Number: (832) 456-9883
Email: accountsreceivable@merfish.com

New Account Documents

Thank you for choosing Merfish Pipe & Supply, LP, the service leader in carbon steel pipe, fittings and flanges, since 1920.

In order for us to set up your new account, **we require an owner or officer** to complete the **New Account Document Packet**, which is available for download by visiting www.merfish.com, under **Customer Care** and clicking **New Customer**.

The packet must include all of the following information to be processed:

- Credit Application must be signed by an owner or officer (**required**)
- Supply your Tax Exemption Certification (**required**)

Merfish may require a personal guarantee to open this account. If so, you will be notified.

Supply most recent comparative annual financial statements (upon request)

Upon completion, please return documents via:

- **Email:** accountsreceivable@merfish.com, or
- **US Mail:** Merfish Pipe & Supply, PO Box 15879, Houston, TX 77220-5879, or
- **Fax:** (832) 456-9883 ATTN: "Accounts Receivable".

Should you have any questions, please do not hesitate to contact your Customer Care Representative. We look forward to serving you!

Thank you,
Merfish Pipe & Supply
Accounts Receivable Department

DATE:	REFERRED BY:	<i>Office use only</i>
NAME OF PURCHASING AGENT:		

CREDIT APPLICATION

LEGAL COMPANY NAME WITH DBA (if applicable):		
PHYSICAL STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:
BILLING ADDRESS:		
CITY:	STATE:	ZIP CODE:
TELEPHONE:	FAX:	
SALES / PURCHASING EMAIL ADDRESS:	ACCOUNTS PAYABLE EMAIL ADDRESS:	
SEND INVOICES VIA: <input type="checkbox"/> EMAIL (include email address) <input type="checkbox"/> FAX (include fax no.) <input type="checkbox"/> MAIL		

KIND OF BUSINESS:	INDIVIDUAL <input type="checkbox"/>	GENERAL PARTNERSHIP <input type="checkbox"/>	LLC <input type="checkbox"/>
	LTD PARTNERSHIP <input type="checkbox"/>	CORPORATION <input type="checkbox"/>	
UNDER THE LAW OF THE STATE OF :			

TYPE OF BUSINESS:		
IF CORPORATION, LEGAL NAME OF CORPORATION:		
IF SUBSIDIARY, NAME OF PARENT CORPORATION:		
REGISTERED AGENTS NAME:		
ADDRESS:		
CITY:	STATE:	ZIP CODE:

LIST ALL OWNERS, PARTNERS OR OFFICERS:

NAME	TITLE	RESIDENCE ADDRESS	RESIDENCE TELEPHONE

YEAR BUSINESS ESTABLISHED:	HOW LONG AT THIS LOCATION:	OWN <input type="checkbox"/>	LEASE <input type="checkbox"/>
ADDRESS OF BUSINESS AT PREVIOUS LOCATION:			

CREDIT REFERENCES:

NAME	ADDRESS	TELEPHONE NO.	FAX NO.

NAME OF BANK:	NAME OF OFFICER:	TELEPHONE:
ACCOUNT NUMBER:	ROUTING NUMBER OF BANK:	FAX:

By signing this agreement, you hereby agree to the Terms & Conditions of Sale and Signature of Sale Supplement which can be found at www.Merfish.com/terms-conditions/ and authorize credit information to be obtained.

Signature _____ Date _____
 (must be signed by owner/officer)