

Paul's **ACE** Hardware

www.paulsacehardware.com

UPDATE OF ESTABLISHED ACCOUNT

Paul's Scottsdale Hardware, Inc. respects any special requirements that your company may have. Please complete the following information so we can do our best to satisfy those requirements.

CORPORATE OFFICE

2845 N. Scottsdale Road
Scottsdale, AZ 85257

(480) 947-7281
Fax (480) 941-5621

Date _____ Account Number _____

Business Name _____

Billing Address _____

City _____ State _____ Zip _____

Street Address _____

City _____ State _____ Zip _____

Business Phone () _____ Fax () _____

Accounts Payable Contact _____ Phone () _____

Accounts Payable Email _____

Persons eligible to sign on the account - please list all or put add / del next to name.

Name _____ Name _____ Name _____

Name _____ Name _____ Name _____

Name _____ Name _____ Name _____

Name _____ Name _____ Name _____

Do you require a form of identification from persons signing on your account? ___ Yes ___ No
If so, what is it? _____

Do you have any other requirements of persons signing on your account?

Are purchase orders required? ___ Yes ___ No If yes, ___ Written ___ Verbal

I affirm that I am authorized to make the above changes.

By _____ Title _____ Date _____

Accounting Options

Fax Statements - will fax your statement on the first business day of the month. You will no longer receive your statement in the mail.
Fax number: _____

Fax Invoices - will automatically fax your invoices when the transaction occurs.
Fax number: _____

E-Statements - will automatically e-mail your statements on the first business day of the month, instead of waiting for the mail. You will no longer receive your statement in the mail.
Statements can be emailed to as many e-mail addresses as you require. Please provide us with the email addresses you would like to receive statements.

E-Invoices - will automatically e-mail your invoices, when the transaction occurs.
Please provide us with the e-mail addresses you would like to receive invoices.

Account Access - You can also access all of your invoices, statements and shop our catalog online by going to our website and clicking on "Account Access". Please provide us with User Names and Passwords or contact Nora at 480-947-7281 for a demonstration.

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	User Name	Password	Ordering Access?	Account Access?
1.			Yes No	Yes No
2.			Yes No	Yes No
3.			Yes No	Yes No

max 10 digits

I affirm that I am authorized to make the above changes for _____
Account Number Business Name

By _____ Title _____ Date _____