



**Static Control®**

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Return Completed Form To:  
Customer Service  
[ImgCS@SCC-INC.com](mailto:ImgCS@SCC-INC.com)

**PRE-PAY APPLICATION**

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**A COPY OF YOUR STATE SALES TAX CERTIFICATE MUST ACCOMPANY YOUR APPLICATION. (US ONLY)**

COMPANY NAME:

D/B/A OR TRADE STYLE(S):

STREET ADDRESS:

CITY:

STATE OR PROVINCE:

COUNTRY:

ZIP/POSTAL CODE:

PHONE:

FAX:

**BUSINESS ENTITY:**

CORPORATION

LLC

PARTNERSHIP

SOLE PROPRIETORSHIP

YEAR ESTABLISHED:

STATE OF INCORPORATION:

PUBLIC OR PRIVATELY HELD:

FEDERAL TAXPAYER ID NUMBER:

RELATED COMPANIES:

SHIP TO ANY OTHER ADDRESS(ES):

OWNER(S)/OFFICER(S): (please include title)

A/P CONTACT:

PHONE:

FAX:

EMAIL:

PREMISES:

OWNED

RENTED

SELL PRIMARILY TO:

RETAIL

WHOLESALE

DISTRIBUTOR

INDUSTRY:

SIC CODE(S) (IF KNOWN):

I hereby represent that I am authorized to submit this information on behalf of the company named above and that the information is provided is warranted to be true. I hereby authorize Static Control Components, Inc. to perform any business search investigation deemed necessary to establish and maintain an account for the applicant. I hereby acknowledge and agree that all charges incurred shall be considered due and payable according to the terms on the invoice and that payment shall be made to Static Control Components, Inc. and forwarded to the designated payment address. I hereby agree to abide by each of the Static Control terms and conditions set out on all invoices ("terms and conditions") as may be amended from time to time and which are incorporated herein by reference. I agree and understand that all necessary collection and legal expenses, including but not limited to collection agency fees, reasonable attorney fees, court costs, filing fees, interest, and service fees may be charged to the debtor in the event of default or failure to pay for goods and services provided. I acknowledge that Static Control Components, Inc. reserves the right to charge interest at the maximum rate allowed by law, in the event of a debtor's default or failure to pay for goods and services sold and delivered. I represent that neither I nor any entities I control or are affiliated with have ever been the subject of a lawsuit which involved a claim by a supplier for payment for goods and services delivered. I hereby acknowledge receipt of a copy of the current terms and conditions and agree to abide by amendments to these terms and conditions as they are posted on the Static Control website. I hereby acknowledge receipt of a copy of Static Control Components, Inc. Terms and Conditions.

I consent to my signature on a facsimile or PDF copy of this document to be legally binding.

COMPANY NAME:

SIGNATURE:

TITLE:

PRINT NAME:

DATE: