

## CUSTOMER SET-UP

**Requesting Terms:** Please complete and return the Robo-Fit Credit Application, please email [sales@robo-fit.com](mailto:sales@robo-fit.com) to request our credit application form.

**Paying by CC:** No credit application is needed, but the customer must provide their CC information before their order ships. Customers can also call this information in over the phone by calling 440-893-9878.

**W9 Copies:** Can be emailed to the customer the same day requested.

**Tax Exempt Form:** Please provide at your earliest convenience.

## ORDERING

Orders can be emailed to: [sales@robo-fit.com](mailto:sales@robo-fit.com)

## CUSTOM PART DESIGN

We employ a full-time mechanical engineer who collaborates with your team to design specialized pneumatic or hydraulic connectors and valves tailored to your needs. Our primary goals for custom items include increasing efficiency, reducing costs, minimizing leak points, decreasing product size/weight, cutting labor, and setting ourselves apart in the marketplace.

-Inquiries can be sent to [William@robo-fit.com](mailto:William@robo-fit.com)

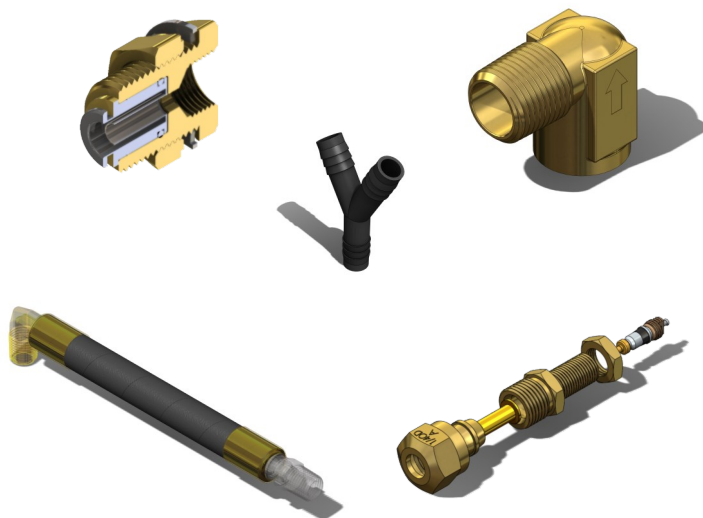
## FREIGHT POLICY

Prepaid Freight is \$2,500.00 for single releases for customers purchasing off of our price sheet.

Shipping Questions or Directions can be sent to [Nick.Russo@robo-fit.com](mailto:Nick.Russo@robo-fit.com)

## BILLING

Billing or accounting inquiries can be emailed to: [ap@robo-fit.com](mailto:ap@robo-fit.com)



*"Our design capabilities are not limited to brass items. Allow our engineers to help your team develop custom items or assemblies in brass, steel, stainless steel, aluminum, and other composite materials."*



## CUSTOMER CREDIT APPLICATION

New Customer ( ) Customer Revision ( )

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Country, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Parent Company:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Country, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Years in Business: \_\_\_\_\_ Years of Inc.: \_\_\_\_\_ State of Inc.: \_\_\_\_\_ Current Supplier: \_\_\_\_\_

If Sales or use Tax Exempt, please write certificate number and attach copy: \_\_\_\_\_

Bank Name: \_\_\_\_\_ Bank Contact: \_\_\_\_\_

Street, City, State and Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_

**Trade References\*:** Dunn & Bradstreet Number: \_\_\_\_\_ Requested Credit Limit \$: \_\_\_\_\_

Company Name • Phone • Email • Contact Person

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

\*Please provide DOMESTIC trade references with credit limits equal to or greater than the credit limit requested.

Robo-Fit Contact: \_\_\_\_\_ Estimated Annual Purchases from Robo-Fit: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Purchasing Contact: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_

**We certify that all the information on this form is correct. We grant permission for our Bank and Business Credit References to release pertinent information to Robo-Fit, LLC.**

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_