



Contact Information:

Phone: +1 (607) 836-8954
Fax: +1 (607) 836-8956
Email: sales@rte-usa.com

All fields must be filled out in order to be considered for terms.

New Customer Setup:

New Customer Setup New Branch Setup Change (Reason): _____

Company Information:

Company Legal Name: _____

Street Address: _____
Country: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax: _____

Shipping Information: (RTE provides free UPS shipping for domestic orders. If you would like to use your own carrier, you assume all liability. Please provide the information below.)

Freight Carrier: UPS DHL FEDEX USPS

Account Number: _____

Shipping Address: *(if different from mailing)*

Company Legal Name: _____
Street Address: _____
Country: _____ City: _____ State: _____ Zip Code: _____

Billing Address: *(if different from mailing)*

Company Legal Name: _____
Street Address: _____
Country: _____ City: _____ State: _____ Zip Code: _____

Contact Information:

Name: _____
Title: _____ Phone: _____
Email: _____ Fax: _____



Send Your Parts To:

RTE, Inc.
1 West Center St.
McGraw, NY 13101 USA

Please include purchase order or reference name

PO Number Required? **Yes** **No**
Tax Exempt? **Yes** **No** (Tax exempt based on shipping destination)

Tax ID # (or Social Security #): _____

***Mandatory for open credit terms.

Business Type: _____ Years in Business: _____

Credit Line Requested: \$ _____ Federal ID# _____

Contact Information: (Accounts Payable)

Name: _____

Email: _____

Payment: For customers with credit approval – RTE’s payment terms are Net 30 days from the date of our invoice. Payment should be made in US dollars using a check or money order whose funds can be drawn on a US bank. RTE also accepts Visa, Master Card, American Express and Wire Transfer. Any payment made later than 30 days could result in COD terms on any subsequent orders.

Terms of Sale: RTE provides goods and services in exchange for payment within terms. It is the company’s normal policy to extend terms of 30 days from invoice date to qualified applicants. Payment is expected at the company’s designated address (specified on invoice) within 30 days of the invoice date. Thirty (30) day terms are upheld. Advance payment or any other method of payment may be required pending receipt and review of customer’s credit application. It is understood and agreed that, once RTE has approved the credit application, payment may be tendered according to the assigned credit terms. RTE may take any action required in case of failure to make payment as agreed. This may include, but is not limited to, use of outside agencies or attorneys. Costs and fees incurred by outside service agencies and attorney’s will be an additional liability on the part of the debtor organization.

Statement of Joint and Several Liability: Sole Proprietorships, Partners, Joint Ventures, Personally Held Corporations. I (We), agree that the Sole Proprietorship, Partnership, Joint Venture, or Personally Held Corporation indicated below will pay all invoices in accordance with agreed terms. All signatories for this organization agree, in the event of the failure of the organization to pay invoices as rendered, to personally reimburse RTE for all liabilities incurred.

By Signing this credit application, you are authorizing RTE to obtain credit information. Signature required.

Name (Please Print): _____ **Title:** _____

Signature: _____ **Date:** _____

OFFICE USE ONLY:

Account Number: _____ Company Terms: _____

Payment Information:

Visa **MasterCard** **American Express** **Discover** **PayPal**

Expiration Date: ____/____/____ 3-Digit Code (CVC): _____

Card Number: _____

Printed Cardholder/PayPal Name: _____

Email (for PayPal): _____