



**South Bend**  
**Corporate**  
6139 Parkland Dr  
South Bend, IN 46628  
574-289-1044  
Fax 574-273-0033

**Elkhart**  
5035 Verdant Street  
Elkhart, IN 46516  
574-296-9700

**Rochester**  
1407 N. Meridian  
Rochester, IN 46975  
574-281-4290

**Gary**  
7201 Melton Road  
Gary, IN 46403  
219-939-8771

## Account Application

*COD account applicants need only complete page 1. Credit applicants, please complete both pages 1 and 2.*

Company Name

Billing Address

City/State/Zip

Office/AP Contact

Office/AP Email

Office/AP Phone

Office/AP Fax

Shipping Address

City/State/Zip

Purchasing Contact

Purchasing Email

Would you like to receive our monthly flyer via e-mail? Yes No

Purchasing Phone

Purchasing Fax

Would you like statements to be emailed?  
(Will be sent to Office/AP contact) Yes No

Would you like invoice copies to be emailed?  
(Will be sent to Office/AP contact) Yes No

Will purchases be tax exempt? Taxable Exempt\*

Are purchase orders required? Yes No

*\*Must submit a valid tax exemption form*

Type of Business

Number of Trucks:

Trailers:

Other Equipment:

*This Section for PBS Associate to Complete*

*This Section for Corporate to Complete*

Branch Number:

Sales Rep Out:

Submitted By:

Territory:

Assign Outside Sales Rep? YES NO

Level:

Notes:

Date:

*Submit completed forms to [jnowak@pbstruckparts.com](mailto:jnowak@pbstruckparts.com) or fax to 574-273-0033*

**South Bend**  
**Corporate**  
6139 Parkland Dr  
South Bend, IN 46628  
574-289-1044  
Fax 574-273-0033

**Elkhart**  
5035 Verdant Street  
Elkhart, IN 46516  
574-296-9700

**Rochester**  
1407 N. Meridian  
Rochester, IN 46975  
574-281-4290

**Gary**  
7201 Melton Road  
Gary, IN 46403  
219-939-8771

## Account Application

*COD account applicants need only complete page 1. Credit applicants, please complete both pages 1 and 2.*

***We require at least 3 trade references and one bank reference to verify credit status.***

Bank Name

Account Number

Phone Number

Fax Number

Reference #1 Name and Location

Contact / Email

Phone Number

Fax Number

Reference #2 Name and Location

Contact / Email

Phone Number

Fax Number

Reference #3 Name and Location

Contact / Email

Phone Number

Fax Number

Yes

No

Business Est. Date

Has the company or any principal owner filed bankruptcy in the last 7 years?

Other Current/Past Businesses

Federal Tax ID

Parent Company

Principal Stockholders

Address/City/State

Phone/Fax/Email

Date Signed

Signature

Printed Name

*Submit completed forms to [jnowak@pbstruckparts.com](mailto:jnowak@pbstruckparts.com) or fax to 574-273-0033*