



**Barcode Automation, inc.**  
**PO Box 195268**  
**Winter Springs, FL 32719-5628**

**Phone: 407-327-2177**  
**800-528-9167**  
**FAX: 407-327-6172**

## Account Application

**Company Information:**

Corporation     Partnership     Sole Proprietor     LLC    Other  \_\_\_\_\_

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

President/Owner: \_\_\_\_\_

Billing address: \_\_\_\_\_ Shipping address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

email: \_\_\_\_\_ www \_\_\_\_\_

Federal Employer Identification (FEI) number \_\_\_\_\_

Years in business? \_\_\_\_ Type of Business:  System Integrator     Distributor     Other

If Other, describe business \_\_\_\_\_

Products and/or Services \_\_\_\_\_

**Deliveries in the state of Florida will be charged Sales Tax unless you provide a Florida Resale Certificate.**

**All new accounts are initially Pre-Paid. Your first order must be paid in advance by credit card, COD, or certified funds. After the first order has been processed, you may apply for Net 30 day terms.**

I hereby apply for an account from Barcode Automation, inc. (BAI) and agree to the following terms: In the event of litigation between BAI and Applicant in which BAI seeks to recover sums due from Applicant, the prevailing party of such litigation shall be entitled to recover from the non-prevailing party the reasonable costs and attorneys fees incurred by the prevailing party in such litigation. At the option of BAI, the venue and jurisdiction of any litigation between BAI and Applicant shall lie exclusively in the state courts of competent jurisdiction located in and for Seminole County, Florida. I hereby expressly consent to such jurisdiction and waive any other venue. By signing below I hereby accept full personal as well as company responsibility for any obligations related to this agreement.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_