



MyAceOnline
Colorado & Wyoming

Edgewater • Highlands Ranch
 Loveland • Windsor
 Green River • Rock Springs

Commercial Account Application

www.myaceonline.com

Fax # (307)362-8867

email: accountsreceivable@myaceonline.com

Please select the store or stores you are applying to:					
<input type="checkbox"/> Buckley Square 17190 E. Iliff Ave. Aurora, CO 80013 P (303) 745-7177	<input type="checkbox"/> Edgewater 1719 Sheridan Blvd Edgewater, CO 80214 P (303) 233-4810	<input type="checkbox"/> Green River 400 Uinta Drive Green River, WY 82935 P (307) 875-1520	<input type="checkbox"/> Highlands Ranch 9579 S. University Blvd. Highlands Ranch, CO 80126 P (303) 683-6300		
<input type="checkbox"/> Loveland 269 E. 29 th St Loveland, CO 80538 P (970) 663-2230	<input type="checkbox"/> Rock Springs 400 N. Center St. Rock Springs, WY 82901 P (307) 362-7362	<input type="checkbox"/> Windsor 1245 Main St. Windsor, CO 80550 P (970) 686-1470	Internal Use Only		
			Emp #:	Store #:	
			Account Number:		
			Credit Limit Approved:		
Type of account requested <input type="checkbox"/> Credit; credit limit requested: \$ _____ <input type="checkbox"/> <u>Pay-at-purchase (cash, check, credit card)</u>			<input type="checkbox"/> Purchase order number required <input type="checkbox"/> Tax exempt (please attach tax exempt certificate)		
BILLING INFORMATION (REQUIRED)			DELIVERY/SHIPPING INFORMATION (IF DIFFERENT)		
Business Name			Business Name		
Address			Street Address (No P.O. box)		
City	State	Zip Code	City	State	Zip code
Phone number	Fax Number		Phone Number	Fax Number	
Primary contact name			Primary contact e-mail address*		
Accounts payable contact name			Email address for electronic invoices (we can e-mail to multiple addresses):		
<input type="checkbox"/> *Check here if you do not wish to receive e-mail communication. We e-mail news and offers only. We never rent or sell your address.					
BUSINESS INFORMATION (REQUIRED)					
Full legal name of business			Years in business	# of Employees	
Federal tax ID number			D&B number		
Type of business <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Other					
Describe primary business activity:					
Is the business involved in any claim or lawsuit? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Has the business ever filed bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is the business contemplating to file bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Has the business had a repossession or judgment taken against it? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Are there any delinquent taxes unpaid for the business? <input type="checkbox"/> Yes. <input type="checkbox"/> No					
PRINCIPLES OF THE BUSINESS					
Name:			Title:		
Name:			Title:		

