



# CREDIT REFERENCE REQUEST

Thank you for your interest in Dura-Bar Metal Services. We are committed to meeting your bar stock needs.

**Bronze** - We carry a complete line of bronze alloys, including continuous cast alloys: C86300, C90300, C90700, C93200, C95400, C95500, C95900 and wrought alloys: C31400, C51000, C54400, C63000.

**Dura-Bar** - We carry a full inventory of Dura-Bar continuous cast iron, stocked in rounds, tubes, squares, rectangles and cut plate. Our ductile grades are ideal alternatives for many carbon steel bar applications. Increase profits by using Dura-Bar to make more parts per hour, extend tool life and gain productivity.

**Services** - We are committed to quickly and accurately quoting, processing and shipping your order - from full bars to cut-to-length pieces. Additional services include precision saw cut plates, custom tubes and just-in-time inventory programs.

**Woodstock, IL**  
800-526-0548  
815-338-3800  
Fax: 815-338-9526

**Salisbury, NC**  
800-438-9174  
Fax: 704-637-9377

**York, PA**  
800-722-5858  
Fax: 973-589-3645

[www.dura-barms.com](http://www.dura-barms.com)

We have established a new account for your company due to a recent quote or inquiry. To avoid delay in the event your company places an order with us, we ask that you fill out the following credit and resale information.

**Please fax to our Accounting Department at 815-338-9526**

YOUR COMPANY \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
YOUR NAME \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

### TRADE REFERENCES

COMPANY NAME \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

COMPANY NAME \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

COMPANY NAME \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

For your convenience, we also accept Visa, Mastercard and American Express Credit Cards

### CERTIFICATE OF RESALE (Required for Illinois customers only)

To: Dura-Bar Metal Services

The undersigned hereby certifies that all tangible personal property hereafter purchased by him is for purposes of resale, and assumes liability of payment of Retailers' Occupation Tax, Service Occupation Tax or Use Tax with respect to receipts from the resale of this property to users or consumers.

Purchaser's Name: \_\_\_\_\_

Address of Purchaser: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature of Purchaser: \_\_\_\_\_

0007-0843 \_\_\_\_\_

Certificate of Registration

Number of Vendor

Certificate of Registration

Number of Purchaser