



CUSTOMER ONBOARDING FORM

RETURN TO:

ORDERS@YSI.COM
 FAX# 937-767-1058

YSI INC.
 1700/1725 BRANNUM LN
 YELLOW SPRINGS OH 45387

BYPASS FILLING OUT THIS FORM BY PLACING YOUR ORDER WITH A CREDIT CARD. TO PLACE AN ORDER ONLINE VISIT YSI.COM OR EMAIL ORDERS@YSI.COM OR CALL (800)765-4974 TO SPEAK WITH SOMEONE TODAY!

LEGAL NAME		INCORP.		PTNRSH		PROPRIETORSHIP
DBA	FED. TAX ID#	W-9 COPY REQUIRED	TAX EXEMPT#	IF EXEMPT, CERT REQ.		
BILLING/MAILING ADDRESS			SHIP TO ADDRESS			
ADDRESS LINE 1:			ADDRESS LINE 1:			
ADDRESS LINE 2:			ADDRESS LINE 2:			
CITY/STATE/ZIP (COUNTRY FOR INT'L):			CITY/STATE/ZIP (COUNTRY FOR INT'L):			
PERSON TO CONTACT FOR PAYMENT			BUYER'S CONTACT			
PHONE NO. (INCLUDE COUNTRY CODE FOR INT'L)			PHONE NO. (INCLUDE COUNTRY CODE FOR INT'L)			
EMAIL	EMAIL	D&B#				
MAJOR TRADE REFERENCE						
NAME OF COMPANY			CITY/STATE/ZIP		CONTACT INFO	
1.					NAME	
					PHONE# (INCLUDE COUNTRY CODE FOR INT'L)	
					E-Mail:	
2.					NAME	
					PHONE# (INCLUDE COUNTRY CODE FOR INT'L)	
					E-Mail:	
3.					NAME	
					PHONE# (INCLUDE COUNTRY CODE FOR INT'L)	
					E-Mail:	

BANK REFERENCE		
NAME	ADDRESS	CITY/STATE/ZIP (COUNTRY FOR INT'L)
ACCT#	PHONE # (INCLUDE COUNTRY CODE FOR INT'L)	FAX# (if known)

I hereby agree, authorize and consent to XYLEM INC., or one or more of its subsidiaries, to obtain credit information from my vendors and my bank. By Execution of this application, I agree to pay within the agreed upon payment terms and to pay interest at the rate of 1-1/2% per month on unpaid balances or as allowed by law, which ever is lower. If my account is placed for collections, I also agree to be responsible for all reasonable counsel fees and court costs incurred.

INTERNAL USE ONLY

CUSTOMER CLASS	SALES CHANNEL	CUSTOMER TYPE (INTERNAL/EXTERNAL)
CREDIT LIMIT	TERMS	EMAIL ADDRESS FOR INVOICE
HFM (INTERCOMPANY ONLY)	Tax Exempt Form Filed and Saved	ADDITIONAL INFO

*Refer to customer master training material for proper procedure for new account set-up.

