

Specification Credit Form

City:

State:

Postal Code:

Date:

Manufacturer Details:		Rep Firm Details:	
Manufacturer:	Re	Rep Firm:	
Contact Name:	Sa	ales Rep:	
City: GrUhY.	Te	erritory:	
Phone: Fax:	Pł	hone:	Fax:
Email:	Er	mail:	

Project Details:			
Project Name: Job Location:			
		Bidder(s):	
City:	GrUhY:	Bid Date:	
Specifier:		Delivery Date:	
City:	GHUHY.	Consultant:	
		SIS Code:	

Products Specified:				
Model#	Qty	Description	Est. Price	Est. Total
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Additional Comments:

For Manufacturer's Use ONLY:

agrees to return a copy to the applicant upon approval of this application. Applications will be considered only in advance of the purchase date. This specification will expire two (2) years from the date submitted, unless a sale has been made as a result of the specification. This specification will automatically renew for two years each time a sales is made as a result of the specification.

Job Awarded To:					
City:	GrUhY:		PO Num:		
Spec Credit Approved:	Spec Credit Denied:	By:	Date:		