



New Customer Account Application Form

- A copy of firm's most current and previous years financial statements are attached.
- An applicable sales tax exemption certificate is attached for US customers
- A copy of firm's three trade references and a bank reference is attached
- A copy of firm's articles of incorporation and amendments is attached for US

** Please include the above requested documentation. Missing information may delay application processing and limit the acceptable payment terms. **

CUSTOMER	FULL OFFICIAL REGISTERED NAME:	Madison County, MS		
	DUNS NUMBER:	884388737	TAX ID NUMBER:	64-6000658
	VAT REGISTRATION NUMBER:	_____		
	SALES CURRENCY:	_____		
	TEREX SALESPERSON:	_____		
		<input type="checkbox"/> Currently a customer of another Terex entity		WHICH TEREX ENTITY:
BILL TO	NAME, IF DIFFERENT FROM ABOVE:	_____		
	ADDRESS LINE 1:	PO Box 608		
	ADDRESS LINE 2:	_____		
	CITY:	Canton	STATE:	MS
	POSTAL CODE:	39046	COUNTY:	Madison
	PROVINCE:	_____		USA
SHIP TO	<input type="checkbox"/> Same as Bill To Above		*For additional Ship To addresses, please attach on another page	
	NAME, IF DIFFERENT FROM ABOVE:	_____		
	ADDRESS LINE 1:	3137 South Liberty		
	ADDRESS LINE 2:	_____		
	CITY:	Canton	STATE:	MS
	POSTAL CODE:	39046	COUNTY:	Madison
PROVINCE:	_____		USA	
CONTACT INFO	GENERAL CONTACT TEL:	Shelton Vance	EMAIL INVOICE TO:	comptroller@madison-co.cor
	GENERAL CONTACT FAX:	_____	EMAIL STATEMENT TO:	comptroller@madison-co.cor
	CUSTOMER WEB ADDRESS:	madison-co.com		
	ACCOUNTS CONTACT:	Shelton Vance	CONTACT TEL:	601-855-5502
	CONTACT EMAIL ADDRESS:	shelton.vance@madison-co.com	CONTACT FAX:	_____
	DO YOU REQUIRE A SUPPLIER FORM TO BE COMPLETED?	N	PURCHASE ORDER REQUIRED?	Y
CERTIFICATION	<p>TEREX SERVICES is hereby authorized to investigate the credit report of the undersigned applicant and report to proper persons and bureaus the discharge of obligations incurred under any credit advanced by TEREX SERVICES. Applicant agrees that any credit will be advanced only on the basis of purchase order or other commercial form designated by TEREX SERVICES. Applicant agrees to promptly pay and discharge all obligations including without limitation to any applicable service and late fees owed to TEREX SERVICES, within NET 15 DAY credit terms. Applicant agrees to pay interest on any loans, advances, or forbearance or on any past due amount at a rate to be determined by provision under Ohio law. Applicant further agrees to pay all costs associated with collection and recovery of any past due account together with court cost and attorney fees incurred in connection with same. Disputes that may arise between the parties to any transaction may, at the discretion of TEREX SERVICES, be resolved through 3rd party arbitration or mediation. Applicant agrees to sign any and all mechanic lien or UCC forms required by the State of Ohio, in favor of TEREX SERVICES to retain security interest in products or services until such time as the financial obligation to TEREX SERVICES has been discharged. Jurisdiction for the enforcement of any transaction made pursuant to this credit application shall be within the County of Montgomery, State of Ohio. The law and decisions of the State of Ohio shall govern all transactions taking place between TEREX SERVICES and applicant(s).</p>			
	CERTIFIED BY (print name & sign, date):	_____		
	POSITION:	_____	DATE:	_____
<p>*Orders must be paid in accordance to terms extended *No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.</p>				

REMIT TO: Terex Services • 62831 Collections Center Dr • Chicago, IL 60693
 Please send the compiled form and attachments to the Terex contact who provided you the form

DO NOT COMPLETE: FOR TEREX BUSINESS UNIT USE ONLY

BRANCH	BRANCH NAME/NUMBER:	52-Waukesha	SALES PERSON NAME/NUMBER:	house for all branches
	Is this for resale purposes? Y/N:	Yes	CUSTOMER GROUP:	End User - Svc Cont
	TYPE OF ACCT(parts/service/both):	parts and service	PRICE GROUP:	End User
	LANGUAGE ON INV/STMT:	English	MATERIAL NUMBER ON INV? Y/N:	yes
	CURRENT CUSTOMER NUMBER:	****CONNECT TO UD48, UD52-UD57	ANTICIPATED CREDIT LIMIT:	\$5,000.00

APPROVALS	Requested By	TIM SCHAEFER
	Branch Manager	JEREMY DEHNEL
	Territory Sales Manager	
	Regional Operations Manager	
	Regional Sales Manager	
	Controller	
	Vice President of Sales	
	Vice President of Operations	
	General Manager	
	Segment Chief Financial Officer	

*SEE DOA TAB FOR PROPER APPROVAL SIGNATURES NEEDED

Please forward the completed form and attachments to GBS.US.AR@terex.com or fax to 1-319-352-9350 ATTN: GBS AR

DO NOT COMPLETE: FOR GBS ACCOUNTS RECEIVABLE USE ONLY

GBS AR	<input type="checkbox"/> A Kewill report has been included for all new International Customers	<input type="checkbox"/> Dun & Bradstreet Report
	CUSTOMER TYPE: <input type="checkbox"/> External	<input type="checkbox"/> Internal (Intercompany)
	COMPANY CODE: _____	SALES ORGANIZATION & OFFICE: _____
	PAYMENT TERMS: _____	CREDIT LIMIT: _____

SIGNATURES	SUBMITTED BY (print name & sign, date): _____
	TEREX GBS MANAGER/CREDIT MANAGER (print name & sign, date): _____
	DATA MANAGEMENT COMPLETED BY: _____ DATE PROCESSED: _____