



CREDIT APPLICATION

Firm Name _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

General Business Information

Type Of Business _____ Years in Business _____

Please check one: _____ Proprietorship _____ Partnership _____ Corporation

Names of Owner(s) or Officers of Corporation or Partnership (Also include Home Address)

Bank Reference:

Bank Name _____ Phone _____

Address _____ Branch _____

City _____ State _____ Zip _____

Bank Contact _____ Account# _____

Major Trade References (Name, Address, & Phone Number)

_____ Phone _____

_____ Fax _____

_____ Phone _____

_____ Fax _____

_____ Phone _____

_____ Fax _____

Financial Statement: Attached () Unavailable ()

Are you Sales and/or Use Tax Exempt? Yes _____ No _____

If yes, give certificate exemption number and complete attached form.

Certificate # _____ D&B # _____

Accounts Payable Contact

Name _____ Phone _____

Fax _____

Please Read These Special Instructions Carefully:

As a convenience and protection for our clients, we ask you to let us know if your account is to be administered by a Purchase order system and names of those who will be authorized to charge to your account. If representations made by the Buyer in this credit application are subsequently found incorrect or incomplete, we reserve the right to reject the application and to negate any obligation to proceed with shipment of any merchandise. The Buyer agrees, however, that any expense incurred as a result of reliance upon incomplete or correct statements made herein by the Buyer may be chargeable to the Buyer.

Buyer recognizes Seller's terms as Net Thirty (30) Days and acknowledges and authorizes a Service Charge of 1 ½ % per month (18% per annum) on any account unpaid after Forty Five (45) Days from date of invoice.

All information will be kept confidential

Signature Title

Date