



APPLICATION FOR CREDIT

Firm Name: _____ Contact person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Principals name: _____ ASI # _____

Federal ID # or SS # : _____ D&B # _____

Bank Reference

Name: _____ Account #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date account opened: _____

Trade References

Firm name: _____ Phone: _____

Firm name: _____ Phone: _____

Firm name: _____ Phone: _____

The undersigned hereby agrees that should a credit account be opened, and in the event of default in the payment of any amount due, and if such account is submitted to a collection authority, to pay an additional charge equal to the cost of collection including court costs.

The undersigned individual who is either a principal of the credit applicant or a sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

Company: _____ Date: _____

Signature: _____ Title: _____

Please print your name: _____

Payment Terms: Net 30 days from date of shipment. A monthly late payment charge of 1.5% is applied to any balance unpaid 30 days after due date. You can receive a copy of your invoice the day after it ships by email or by fax. Please let us know which you prefer and to where we should send it. _____

All orders are subject to credit approval by our credit department and will not be processed until approved. We accept Visa, Mastercard, American Express and Discover.

If paying by credit card, payment must be made at time of order.

Thank You. We look forward to doing business with you.

Please sign & FAX back to (847)-301-7985