



Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Ship to Address (If different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

Federal Tax ID or Social Security Number: \_\_\_\_\_

Date Business Established: \_\_\_\_\_

Type of Ownership  Corporation  Partnership  Sole Proprietorship  Other

Type(s) of Corporate Credit Cards  American Express  Master Card  Visa  Other

Are you Sales Tax exempt?  Yes  No Sales Tax Exempt # \_\_\_\_\_

Anticipated monthly purchases \$ \_\_\_\_\_

**Principals, Partners or Corporate Officers**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**Trade References:**

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

**Bank Reference:**

Name of Bank: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

I represent that the above information is true and is given to extend credit to the applicant. My company and I authorize to make such credit investigation as sees fit, including contacting the above trade references, banks and obtaining credit reports. My company and I authorize all trade references, banks and credit reporting agencies to disclose to any and all information concerning the financial and credit history of my company and myself.

**GENERAL TERMS AND CONDITIONS:**

- 1) All past due accounts will be subject to a monthly service charge at the maximum rate allowed by state law if not paid within 30 days.
- 2) No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.
- 3) If the account is placed with an attorney, whether a lawsuit is filed or otherwise, or if services of an attorney are required to protect our interest, you agree to pay all costs and suit fees, including a reasonable attorney's fee on the principal and service charges.

**PERSONAL GUARANTEE:**

If the credit customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased on credit by the corporation.

**I have read the terms and conditions stated and agree to all of these terms and conditions.**

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_