

CREDIT APPLICATION

# BUSINESS CONTACT INFORMATION

|  |  |  |
| --- | --- | --- |
| Company name |  | Are you sales tax exempt?  Yes  No  Resale # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  It is assumed that all sales to your company will be taxable in the city, parish, and state in which the goods are picked up/ delivered. If you are outside the city limits, please specify.  \*\* **If sales tax exempt, please enclose copies of exemption certificates.** |
| Sole proprietorship  Partnership  Corporation  Other | |
| Federal ID Number |  |
| Phone |  |
| Fax |  |
| Registered company addressCity, State ZIP Code |  |
| Email |  |
| Preferred Method for Invoicing | Mail  Email  Fax |
| Accounting Contact |  |  |

# BUSINESS AND CREDIT INFORMATION

|  |  |
| --- | --- |
| Bank name: |  |
| Primary business addressCity, State ZIP Code |  |
| Phone |  |
| Contact Name |  |

# BUSINESS/TRADE REFERENCES

|  |  |  |  |
| --- | --- | --- | --- |
| Company name |  | Phone |  |
| Address City, State ZIP Code | | Fax |  |
| E-mail |  |
| Company name |  | Phone |  |
| Address City, State ZIP Code | | Fax |  |
| E-mail |  |
| Company name |  | Phone |  |
| AddressCity, State ZIP Code | | Fax |  |
| E-mail |  |

# agreement/Terms

All invoices are NET 30 Days, with the exception of fuel transports, which are NET 10 DAYS. Invoices are given at the time of delivery/pickup and additional copies are mailed/faxed/emailed with the statements. A service charge 1½ % per month will be made on past due accounts. This is equivalent to 18% per year.

I have personally read this credit application, and guaranty to the validity of all information provided and payment terms.

# SIGNATURES

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Signature |  |
| Title/Date |  | Title/Date |  |