

# CREDIT APPLICATION

Please complete all fields, sign and fax to (301) 662-5487.

<b><u>STULZ-ATS OFFICE USE ONLY</u></b>	
Job Number(s): _____	
Amount of Order: \$ _____	Purchase Order #: _____ (Attach copy)
Approximate Ship Date: _____	Initials of CSR: _____

Business/Firm Name: \_\_\_\_\_

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

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

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Year Established: \_\_\_\_\_

Check One: Corporation  Partnership  Sole Proprietorship

**NAMES & TITLES OF PRINCIPLES:**

1) \_\_\_\_\_ Title: \_\_\_\_\_

2) \_\_\_\_\_ Title: \_\_\_\_\_

3) \_\_\_\_\_ Title: \_\_\_\_\_

**ACCOUNTS PAYABLE CONTACT:**

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

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

**TRADE REFERENCES:** (List three vendors from whom you have purchased in amounts equal to this order)

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

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

**BANK REFERENCE:**

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

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

Contact: \_\_\_\_\_ Bank Officer: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Applicant accepts and agrees to the following payment terms:

- 1% 10 Net 30 (for equipment)
- Net 30 (for parts)

Credit terms are 30 days from date of invoice. Outstanding balances are subject to 1.5% per month interest. The undersigned authorizes the releases all banks persons and companies listed on this application to furnish information and authorizes the checking of credit. The undersigned agrees to pay all collections costs, court costs, and legal fees incurred to collect delinquent balances.

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

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

**Personal Guarantee:**

In consideration for credit extended, the undersigned contracts and guarantees to the faithful payment, when due, of all accounts of the company seeking credit for 5 years from the date of this application. The undersigned guarantor expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notice of default by the company seeking credit and all other notices the guarantor might be entitled to. Revocation of the guarantee shall be in writing and delivered by certified mail.

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

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