

# CREDIT APPLICATION

To claim exemption from sales tax, please fill out the sales tax exemption certificate on page 99.

The following information is submitted as the basis for the extension of credit to the undersigned for an open account.

Please Type or Print—Fill out form completely

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

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

Mailing address (Use only if different than above)

Type of organization:  Proprietorship  Partnership  Corporation

Type of business \_\_\_\_\_ How long in business \_\_\_\_\_

Are purchase orders required?  Yes  No Do you require more than one invoice copy?  Yes  No

Sales Tax Status:  Taxable \_\_\_\_\_

Sales Tax Exemption # \_\_\_\_\_

Other (Please explain) \_\_\_\_\_

If business is a corporation, complete following:

Home office address \_\_\_\_\_

Is this a branch or subsidiary of another company?  Yes  No If answer is Yes, complete following:

Name of parent company \_\_\_\_\_

Address (street, city & state) \_\_\_\_\_

Are payments made locally or from another office? \_\_\_\_\_

If from another office, give location \_\_\_\_\_

If partnership or proprietorship, circle appropriate title and complete following:

Full name of partner or owner \_\_\_\_\_ Full name of partner or owner \_\_\_\_\_

S.S. # \_\_\_\_\_ Home Ph. No. \_\_\_\_\_ S.S.# \_\_\_\_\_ Home Ph. No. \_\_\_\_\_

Home address \_\_\_\_\_ Home address \_\_\_\_\_

City & state \_\_\_\_\_ City & state \_\_\_\_\_

Spouse's first name \_\_\_\_\_ Spouse's first name \_\_\_\_\_

Do you have current rating with Dun & Bradstreet?  Yes  No Number \_\_\_\_\_

Is current financial statement available?  Yes  No Please attach copy if possible.

Bank \_\_\_\_\_ Loan officer \_\_\_\_\_ Phone \_\_\_\_\_ Loans  Checking  Savings

Trade references for charge accounts carried in name of company making application.

NAME ADDRESS TELEPHONE NO.

Terms of sale are: NET 30 PAY BY INVOICE LINE OF CREDIT APPLYING FOR \_\_\_\_\_

## SPECIAL BILLING AND/OR SHIPPING INSTRUCTIONS

Debtor accepts credit with the understanding that all bills will be paid in accordance with our terms, regardless of where, when, or how the materials purchased from us may be used. Debtor agrees to pay a service charge equal to one percent (1%) per month on all amounts not paid within our terms. No shipments are made against a past due account. It is agreed that sales are made and amounts due are payable at Dallas, Dallas County, Texas. In the event collection is made through an attorney, reasonable attorney's fees and all other cost or collection shall be paid by debtor. All accounts are subject to the credit limits set by our credit department.

In return for the extension of credit, I/we hereby agree to be bound by this agreement.

Date \_\_\_\_\_ Signed by \_\_\_\_\_

For Corporation: Must be officer and show title.

For Partnership: Must be Partner. Signature indicates partners agree and can be held liable for debts of partnership.

For Individuals: Spouse must also sign, and agrees to be held liable for debts of spouse making application.

The above is true, correct, and complete to the best of my knowledge.

Date \_\_\_\_\_ Signed X \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_ Limits \_\_\_\_\_ Terms \_\_\_\_\_ Approved by \_\_\_\_\_

Rejected \_\_\_\_\_