

Credit Application - Customer Profile

Company Name:		
Billing Address:		
City/State	Zip-code	County
Billing Contact Name		
E-mail Address for Billing/Invo	oicing	
Phone Number:	Fax Number:	
Dunn & Bradstreet Number:		
Worksite Name:		
Worksite Address:		
City/State	Zip-code	County
Worksite Contact Name:		
Email:		
Phone Number:	Fax Number:	
Bank References:		
Bank Name		
Phone Number	Account #	
Bank Address		
Officer In Charge Of Account	Phone	÷#
HOW DID YOU HEAR ABOUT	US?	
Yellow Pages Trade Show	Your salesman contacted us _	We read
your ad in	We saw your TrucksReferred b	у



References:	
Company Name:	
Contact:	Account Number
Phone Number:	Fax Number:
Company Address:	
Company Name:	
Contact:	Account Number
Phone Number:	Fax Number:
Company Address:	
Company Name:	
Contact:	Account Number
Phone Number:	Fax Number:
Company Address:	
MEMBER of, NAED,	AAMD, COMPLIANCE DEPOT, SUPPLIER CLEARINGHOUSE
become void if changed in any way; the complete quote must subject to the manufactures warranty. Labor charges must be	erify all voltages, dimming ballast compatibility and multi-level switching requirements. Quotes be used; no partial breakouts will be accepted. Quotes do not include Shipping or Tax. All Material is negotiated and put in writing on all jobs prior to quoting and ordering of any material. All accounts change credit terms if accounts are not current. Future orders and shipments may require
	sufacture terms. If cancellation is allowed there will be a 15% charge to cancel the order. Special cancellation is approved by the manufacturer there will be a 15% charge to cancel the order and in blied.
Returns Policy: Stocked Items must be returned within 10 busi are allowed restock fee and shipping charges will apply	iness days from receipt of goods. Nonstocked items are subject to the manufacture terms. If returns
The above is true and accurate statement of our affairs and is and every purchase of merchandise from you hereafter until v	s made for the purpose of obtaining credit and we agree that it may be considered as such on each we advise you in writing to the contrary.
within thirty (30) days of the date of the invoice shall be su	, Payment terms are net thirty (30) days from the date of the invoice, Any payments not mac ubject to a late payment charge of $1\%\%$ per month (compounded) on the unpaid balance of an of default of payment of any invoices to pay reasonable attorneys' fees and cost of collection.
DATESigned By	<u></u>
	Authorized Signature
	Printed Name and Title