

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Company name:

Phone:

Fax:

E-mail:

Billing address:

Shipping address:

City:

State:

ZIP Code:

State resale tax number:

Company Federal Identification Number:

Date business commenced:

How long at current address?

Sole proprietorship:

Partnership:

Corporation:

Other:

BUSINESS AND CREDIT INFORMATION

Bank name:

Bank address:

Phone:

City:

State:

ZIP Code:

Type of account

Account number

Savings

Checking

BUSINESS/TRADE REFERENCES

Company name:

Account number:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Account number:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Account number:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

CREDIT TERMS

All accounts payable upon receipt of invoice, net 30 days. Applicant's signature attests financial responsibility, ability and willingness to pay reasonable attorney fees plus interest in case of default in payments in compliance with terms. A finance charge of 1 ½% per month, which is 18% per year will be charged on all accounts after 30 days from original invoice date. \$1.00 minimum finance charge.

If you would like to pay all invoices with a credit card, please provide the following information:

CREDIT CARD INFORMATION:

Credit Card Company: _____ Credit Card Number: _____

Expiration Date: _____ First four digits of billing street address: _____

Billing zip code: _____ Three digit code found on back of card _____

SIGNATURE:

TITLE:

DATE:



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