



Credit Application

Customer Name: _____ NAICS Code: _____

Billing Address: _____ D&B #: _____

City: _____

State: _____ Zip _____

Accounts payable contact: _____

Phone: _____ Fax: _____

AP e-mail: _____ (this is for invoices to be sent to)

NOTE: Standard Payment terms are Net 30 Days

California Customers Only (tax information)

Taxable County: _____

If tax exempt -CA Sellers Permit #: _____ (also attach resale or tax exempt certificate)

Pennsylvania Customers Only (tax information) - provide PA Sales exemption certificate

Shipping Information: (if multiple ship to addresses, provide additional sheet)

Ship to name: _____

Address: _____

City: _____ State: _____ Zip code: _____

NOTE: Standard Freight Terms: Exworks Shipping Facility

Preferred Carrier & acct #: UPS _____ Fedex _____ LTL carrier _____

Trade References

Please provide 3 trade references on separate sheet that includes the following information for each:
Company Name, Contact Person, Address, Phone, Fax and Email address

Bank Information

Bank Name: _____ Contact: _____

Address: _____ Phone: _____

Account Number: _____