



## APPLICATION FOR CREDIT WORKSHEET

### Billing Address:

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

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

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

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

A/P Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Tax Exempt: Yes \_\_\_\_\_ No \_\_\_\_\_

*(If yes, please send a signed tax exemption or resale certificate w/this application.)*

Line of Business: \_\_\_\_\_

Dun and Bradstreet Number: \_\_\_\_\_

Year Founded: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Please check one: \_\_\_\_\_ Individual Ownership \_\_\_\_\_ Corporation

\_\_\_\_\_ Partnership \_\_\_\_\_ Other

Names of Officers or Owners:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Shipping Address:

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

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

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

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Federal Tax ID#: \_\_\_\_\_

*(Please provide a signed W-9 form w/this application.)*

Title:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## TRADE REFERENCES

(In order to speed up the application process, please provide a fax number or an email address for each reference.)

Company Name: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Account Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Account Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Account Number: \_\_\_\_\_



### BANK REFERENCES

Bank Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Contact: \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT'S SIGNATURE ATTESTS PERSONAL/CORPORATE/COMPANY FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY SURFACE ARMOR LLC INVOICES IN ACCORDANCE WITH THE TERMS LISTED BELOW.** The information given above is for the purpose of obtaining credit and is warranted to be true. I/we hereby authorize Surface Armor LLC to investigate the references listed pertaining to my/our credit and financial responsibility.

Firm Name: \_\_\_\_\_ Date: \_\_\_\_\_

By: \_\_\_\_\_ Title: \_\_\_\_\_  
(Signature)

By: \_\_\_\_\_ Title: \_\_\_\_\_  
(Printed Name)

**Payment Terms** are net 30 days from date of invoice where satisfactory open account credit is established. Surface Armor LLC reserves the right to revoke or modify any credit at its sole discretion. Purchaser agrees to pay each invoice when due. In the event that the Purchaser defaults on its obligation to pay each invoice when due, then, in addition to all other rights and remedies available to it, Surface Armor LLC shall have the option to withhold any further shipments of material and/or the provision of any services including TIS, until Purchaser's account is fully paid. Further, in the event payment is not received according to Terms, Surface Armor LLC may, at its discretion, assess interest at the rate of 1-1/2% per month or the maximum rate allowed by law, whichever is lower. Purchaser also agrees to pay reasonable legal fees or agency omissions sustained by Surface Armor LLC in pursuit of payment which is past due.