

CREDIT APPLICATION

Customer Information

Shipping Address (if different than billing)

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

A/P Contact _____

Company Website Address _____

A/P Contact Email Address _____

General Business Information

Business description _____ # of Years in Business _____

Organization type: _____ Individual _____ Corporation _____ Partnership _____ Other _____
Please describe

Please indicate if you are: _____ Owner _____ Partner _____ Principal _____ Stockholder

Owner Information: _____
Print Name & Complete Address

Are you Sales and/or Use Tax Exempt? _____ Yes _____ No if yes, you must include a copy of your exempt certificate.

Bank Information - A duly authorized individual must complete**

Bank Name _____ Contact Name _____

Address _____ Phone No. _____

Account # _____ Fax No. _____

**I, _____ authorize the bank listed above to release information to Atlantic Stainless Co., Inc.
Failure to complete this section will result in a delay of the approval of your credit application.

Business/Trade References

Name

Fax # OR Email Address

1. _____
2. _____
3. _____

CONTINUING WARRANTY: in consideration of the extension of credit by the Seller, herein to Buyer herein, the undersigned does jointly and severally personally guaranty to pay and be responsible for payment of all sums, balances, and accounts due Seller by Buyer, including collection charges and/or attorney fees.

Signature _____ Print Name _____ Date _____

We certify that all of the information on this form is true and correct; and that we fully understand your credit terms, including the service charge on overdue invoices, and agree to the proper payment in consideration of extended credit, including charges made by a collection agent up to 40% of the balance due, and in the event of a suit, reasonable attorney fees and court costs.

Signature _____ Title _____ Date _____

Terms: N30