

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: _____
Name & Complete Address

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

Banking Information

Bank Name _____ Contact Name _____

Address _____ Phone No. _____

Checking Acct.# _____ Savings Acct# _____

I, _____ authorize the bank listed above to release information to Atlantic Stainless Co., Inc.

Business/Trade References

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Fax</u>
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.

TERMS: NET 30

Signature Title 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