



CUSTOMER APPLICATION FOR CREDIT

Company Name: \_\_\_\_\_ Salesperson: \_\_\_\_\_
Billing Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_
Shipping Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_
Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_
Type of Business: \_\_\_\_\_ State \_\_\_\_\_
Licensed: \_\_\_\_\_ Years in Business: \_\_\_\_\_
Buyer Contact: \_\_\_\_\_ Phone Number & Email Address: \_\_\_\_\_
Accounts Payable Contact: \_\_\_\_\_ Phone Number & Email Address: \_\_\_\_\_

Invoicing Preferences

Do you want to receive statements? Y or N
Is a PO# or Job Name required on all orders? Y or N
Email: \_\_\_\_\_
Fax: \_\_\_\_\_
Tax Exempt #: \_\_\_\_\_

Please include tax exemption form

Principals:

Table with 5 columns: Name, Title, SSN#, Home Address, Phone. Two rows for listing principals.

Bank Reference

Name: \_\_\_\_\_
Address: \_\_\_\_\_
Phone: \_\_\_\_\_

Credit References

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Release of Confidential Information:

In signing below, I/we authorize the release of credit information from the bank & companies listed on this application to Triangle Fastener Corporation. I/We understand this information will be used solely for the purpose of determining credit.

Terms:

In signing this application I/we do so with the understanding that I/we agree to pay all purchases according to Triangle Fastener Corporation Terms. Our terms are: 1% 10 NET 30.

Initials: \_\_\_\_\_

Annual Purchases with TFC: \_\_\_\_\_

Suggested credit limits (based on yearly purchases):
300K - 35K 250K - 30K 200K - 20K 150K - 15K 100K - 12K

Customer Class: \_\_\_\_\_

Salesperson Review Date: \_\_\_\_\_

Customer Signature \_\_\_\_\_ Date: \_\_\_\_\_ Credit Limit Requested: \$ \_\_\_\_\_

\*TFC USE ONLY: Approved by: \_\_\_\_\_ Limit: \_\_\_\_\_ D&B Rating: \_\_\_\_\_