

PHONE  
1-800-352-0800



Fax 24 hrs  
610-534-3202

## CREDIT APPLICATION

### Billing Information

Name	Phone	Fax
Company	E-Mail	
Street		
City	State	Zip

### Ship To Information (if different from above)

Name		
Company		
Street		
		<input type="checkbox"/> Commercial <input type="checkbox"/> Residential
City	State	Zip

### Ownership

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Other, explain
Principals			
Name	Address	City, State, Zip	
Federal I.D. Number			

### Customer Special Conditions (circle your choice)

1. PO required?	yes	no	4. Require fax or email acknowledgments on all orders.	yes	no
2. Monthly statements?	yes	no	5. Print your part # on packing slip?	yes	no
If yes, do you want:		<input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail	6. Designate orders to:		
If no, you will only receive invoice. How do you want to receive your invoice?		<input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail	a. ship complete / no back orders		
3. Print prices on packing slip?	yes	no	b. ship complete unless otherwise specified		
(not recommended for those using our drop ship program)			c. ship partials / ship back orders complete		
			d. ship partials / ship back orders as they come in		

### Bank Reference

Bank Name	Address		
Type of Account	Account #	Bank Officer's Name	Phone

### Vendor Reference

Company	Fax	
Street	Phone	E-Mail
City	State	Zip
Company	Fax	
Street	Phone	E-Mail
City	State	Zip
Company	Fax	
Street	Phone	E-Mail
City	State	Zip

**NOTE: If Applicable, your PA or FL Sales Tax Exempt Certificate MUST accompany credit application.**

I the undersigned confirm that all information given in this application is true and correct to the best of my knowledge. I understand that terms on all purchases are net 30 days. If this application is approved, I recognize that I/we will be responsible for any attorney's fees and /or costs incurred in the collection of any unpaid balance.