

# CREDIT APPLICATION

## CONTACT INFORMATION

Business Name:

DBA:

Phone:

Fax:

E-mail:

Address:

City:

State:

ZIP Code:

Federal Tax ID:

Type of Business

Individual

Partnership

Corporation

Other

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Will Orders Require a Purchase Order?

Yes

No

## BUSINESS AND CREDIT INFORMATION

Name/Title:

SSN:

Residential Address:

City:

State:

ZIP Code:

Name/Title:

SSN:

Residential Address:

City:

State:

ZIP Code:

Bank name:

Bank address:

Phone:

Fax:

City:

State:

ZIP Code:

Type of account:

Account number:

## BUSINESS/TRADE REFERENCES

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Account number:

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Account number:

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Account number:

## AGREEMENT

**Please Read the Following Carefully:** I/We understand that all invoices are due and payable within 30 days of invoice date, and I/We agree to pay all invoices promptly when rendered. I/We understand that all unpaid balances after 30 days will be assessed finance charges at 1.5% per month until paid. In the event that legal action, liens, or the engagement of a collection agency become necessary to collect my/our account, I/We agree to pay all expenses incurred, including but not limited to collection fees, attorney's fees, lien fees and court costs. **Please go to <http://oneilprint.com/media/docs/TandC.pdf> to see O'Neil's Terms and Conditions of Sale.**

## SIGNATURES

Date:

Date: