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CREDIT APPLICATION

Business Name: _____

Phone: _____ Fax: _____

Mailing Address: _____

Shipping Address: _____

D/B/A: _____ Federal Tax ID# _____

Date Established: _____ How Long in Business: _____

OWNERSHIP: Sole Proprietorship Partnership Corporation LLC

PRINCIPAL:

(NAME) (TITLE) (SS#)
PRINCIPAL:

(NAME) (TITLE) (SS#)

ACCOUNTS PAYABLE CONTACT:

(NAME) (TITLE) (PHONE#/EXT.)

TRADE REFERENCES

Name: _____

Address: _____

Phone# & Fax#: _____

Name: _____

Address: _____

Phone# & Fax#: _____

Name: _____

Address: _____

Phone# & Fax#: _____

Name: _____

Address: _____

Phone# & Fax#: _____

BANK REFERENCES

(NAME) (ADDRESS) (ACCT.#) (CONTACT)

(NAME) (ADDRESS) (ACCT.#) (CONTACT)

OF EMPLOYEES: _____ EST. ANNUAL SALES: _____ SALES AREA: _____

Has the firm or any of its principals ever been Bankrupt? YES NO

If YES, explain: _____

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

In consideration for the extension of credit, said business promises to pay for all purchased within the terms agreed (Net 30 days) and agrees to pay a service charge of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Name of Business: _____

Name: _____ Title: _____ Signature: _____

Name: _____ Title: _____ Signature: _____