

CREDIT APPLICATION

COMPANY INFORMATION:

Company Name:			Federal Tax ID or SSN:		
Address:			County:		
City	State	Zip	Years in Business:		
Telephone #:		Fax #:	Credit Manager Name:		
Ownership:	<input type="checkbox"/> Corporation		<input type="checkbox"/> Partnership		<input type="checkbox"/> Individual
Officers Names:	Address:		Telephone #:		
1.					
2.					
3.					
Purchase Order Required?		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Credit Limit Requested:			Sales Rep:		

FINANCIAL REFERENCES:

Bank Name			Bank Contact:		
Address:			Account #:		
City	State	Zip	Telephone #	Fax #	

TRADE REFERENCES:

1	Company Name:	Telephone:
	Address:	Fax:
2	Company Name:	Telephone:
	Address:	Fax:
3	Company Name:	Telephone:
	Address:	Fax:

TERMS AND CONDITIONS:

*****ALL INFORMATION IS CONFIDENTIAL AND WILL BE HELD IN THE STRICTEST CONFIDENCE*****
The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers. The Ohio Civil Rights Commission administers compliance with this law.
Our terms are NET 15 DAYS. Chemtron Corporation reserves the right to revoke credit privileges and/or charge a finance charge of 1 _% per month if terms are not met.
Sales tax laws mandate that we charge sales tax where applicable. You will be charged sales tax where applicable unless you have a completed exemption form on file with Chemtron. New York customers must file a New York sales tax exemption certificate with Chemtron Corporation.
All orders will be COD until the credit application is approved and open account status is established. COD orders will be invoiced at worst case scenario.

I certify that the above information is accurate. I am a duly authorized representative of the company named above and I authorize an investigation of the company's credit history and agree to the above terms as specified.

Name	Signature
Title	Date
