



APPLICATION FOR CREDIT **FAX: 267-538-5800**

SECTION A:

CORPORATION: _____

NAME _____ FEDERAL TAX ID _____

ADDRESS _____ () _____
CONTACT PHONE NUMBER

CITY _____ STATE _____ ZIP _____ FAX NUMBER _____ () _____

PRESIDENT _____ E-MAIL _____

VICE-PRESIDENT _____ TREASURER _____

CONTROLLER _____ BUYER _____

ACCTS. PAYABLE CONTACT _____ CREDIT REQUESTING _____

IS THIS BUSINESS A: BRANCH SUBSIDIARY DIVISION NOT APPLICABLE

_____ PARENT COMPANY _____ CONTACT NAME

_____ ADDRESS () _____ CONTACT PHONE NUMBER

_____ CITY STATE ZIP FAX NUMBER () _____

DUN AND BRADSTREET #: _____ TAX EXEMPT #: _____

FINANCIAL STATEMENTS ATTACHED- _____ TAX EXEMPT CERTIFICATE MUST BE ATTACHED _____

SECTION B:

NUMBER OF EMPLOYEES: _____ YEAR INCORPORATED _____ STATE INCORPORATED _____

PRIMARY NATURE OF BUSINESS: _____

BANK INFORMATION:

BANK NAME: _____

ADDRESS 1: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBER: _____ FAX: _____

OFFICER: _____

CHECKING ACCOUNT NUMBER (S): _____ LOAN NUMBERS _____

TRADE REFERENCES :(ATTACH STANDARD FORM IF AVAILABLE)

<p>1. NAME: _____</p> <p>ADDRESS (1) _____</p> <p>ADDRESS (2): _____</p> <p>CITY: _____ STATE: _____ ZIP: _____</p> <p>ACCOUNT NO.: _____</p> <p>CONTACT NAME: _____</p> <p>TELEPHONE: _____ FAX: _____</p>	<p>2. NAME: _____</p> <p>ADDRESS 1: _____</p> <p>ADDRESS 2: _____</p> <p>CITY: _____ STATE: _____ ZIP: _____</p> <p>ACCOUNT NO.: _____</p> <p>CONTACT NAME: _____</p> <p>TELEPHONE: _____ FAX: _____</p>
<p>3. NAME: _____</p> <p>ADDRESS (1) _____</p> <p>ADDRESS (2): _____</p> <p>CITY: _____ STATE: _____ ZIP: _____</p> <p>ACCOUNT NO.: _____</p> <p>CONTACT NAME: _____</p> <p>TELEPHONE: _____ FAX: _____</p>	<p>4. NAME: _____</p> <p>ADDRESS 1: _____</p> <p>ADDRESS 2: _____</p> <p>CITY: _____ STATE: _____ ZIP: _____</p> <p>ACCOUNT NO.: _____</p> <p>CONTACT NAME: _____</p> <p>TELEPHONE: _____ FAX: _____</p>

SECTION C: TERMS AND CONDITIONS:

- Company may modify or terminate any credit granted to applicant at any time and without notice.
 - Applicant agrees to pay all amounts due by the due date as stated on invoice.
 - Past due accounts are subjected to a 1 ½ % per month service charge or the maximum allowable legal amount, which ever is lower
 - Company may withhold shipment of product due to non-payment of invoice(s).
 - In the event of default or litigation applicant /customer agrees to pay all costs of collection incurred including attorney fees.
 - All products are sold subject to Vexcon's published materials Limited Warranty and Terms and Conditions of Sale and can be changed without notice. You may view our Warranty's and Terms and Conditions of Sale at vexcon.com.
 - Applicant agrees to litigate all disputes in courts in jurisdiction of company's location in Philadelphia, PA.
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SECTION D:

CUSTOMER SIGNATURE: _____ PRINT NAME: _____
I AM AUTHORIZED ON BEHALF OF THE COMPANY LISTED ON THIS APPLICATION TO APPLY FOR CREDIT AND TO AGREE TO THE ABOVE TERMS AND CONDITIONS.

COMPANY NAME: _____ DATE SIGNED: _____