

FREEWAY FASTENERS

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CREDIT APPLICATION

- 1 NAME: _____
ADDRESS: _____
PHONE: _____
FAX: _____
EMAIL: _____
- 2 YEAR ESTABLISHED: _____
- 3 INDIVIDUAL PROPRIETORSHIP: _____ CO-PARTNERSHIP: _____ INCORPORATED, STATE: _____
- 4 NAME & LOCATION OF PARENT CORP. (OR LEGAL NAME OF ABOVE IF DIFFERENT):

- 5 OWNERS OR OFFICERS (INCLUDING TITLE):

- 6 PRODUCT LINE: _____
- 7 TYPE OF BUSINESS: MANUFACTURER WHOLESALER RETAILER SERVICE
- 8 BANK INFORMATION (INCLUDING NAME, ADDRESS, PHONE# AND ACCOUNT#):

- 9 PRINCIPAL OPEN ACCOUNT SUPPLIERS (INCLUDING NAME, ADDRESS, PHONE# AND FAX#):
 - 1) _____
 - 2) _____
 - 3) _____
 - 4) _____

10 ESTIMATE OF MONTHLY CREDIT NEEDS: \$ _____

(IF ACCOUNT BALANCE WILL EXCEED \$1,000, PLEASE ATTACH YOUR CURRENT, SIGNED FINANCIAL STATEMENT)

11 WILL YOU ACCEPT C.O.D. TERMS PENDING ESTABLISHMENT OF AN OPEN ACCOUNT?

YES NO IF NO WHY?

12 PLEASE CHECK THE BASIS ON WHICH YOU USUALLY PAY MERCHANDISE BILLS:

DISCOUNT 30 DAYS 60 DAYS 90 DAYS

13 SELLER'S PERMIT NUMBER:

THE INFORMATION ABOVE IS TRUE AND COMPLETE AND IS SUBMITTED TO FREEWAY FASTENERS, INC. FOR THE PURPOSE OF SECURING CREDIT. IN CONSIDERATION FOR THE EXTENSION OF CREDIT, APPLICANT AGREES THAT PAYMENT WILL BE MADE ACCORDING TO FREEWAY FASTENERS, INC'S TERMS OF 1% 10 DAYS, NET 30 OR OTHERWISE SPECIFIED ON THE INVOICE. APPLICANT AGREES TO ACCEPT RESPONSIBILITY FOR THE PURCHASES MADE IN HIS NAME UNTIL FREEWAY FASTENERS, INC. IS NOTIFIED IN WRITING TO THE CONTRARY. APPLICANT FURTHER AGREES THAT IN THE EVENT OF DEFAULT IN PAYMENT(S) AND COLLECTION EFFORTS ARE INSTITUTED, APPLICANT WILL PAY ALL ACTUAL LEGAL FEES AND COSTS INCURRED BY FREEWAY FASTENERS, INC. IN RELATION TO THERE OF.

THE OWNER OR AN OFFICER OF THE CORPORATION MUST SIGN:

SIGNATURE

TITLE

DATE
