



FIRE EQUIPMENT COMPANY

Customer Credit Application

Company Name: _____	Billing Address: _____
Address: _____	City/State/Zip: _____
City/State/Zip: _____	Owners Name: _____
A/P Name: _____	Terms Applied For (choose one):
A/P E-mail: _____	Net 30
A/P Phone: _____	COD
	Credit Card (keep on file)
	CC# _____
	CC expiration _____
Are your purchases tax exempt? Y N	Code _____
If yes, attach certificate from each state.	Are Purchase Order No's Issued? Y N
How long have you been in business? _____	Credit amount requested? \$ _____

Trade References (No Utilities or Credit Cards)

Trade References Email Addresses are Required

1.) Name: _____	2.) Name: _____
Address: _____	Address: _____
_____	_____
E-mail: _____	E-mail: _____
Contact Person: _____	Contact Person: _____
3.) Name: _____	4.) Name: _____
Address: _____	Address: _____
_____	_____
E-mail: _____	E-mail: _____
Contact Person: _____	Contact Person: _____

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (net 30) and agrees to pay a service charge per month of 2% per month (24% 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.

Print Name: _____	Title: _____
Signature: _____	Date: _____