

### CREDIT APPLICATION

#### BUSINESS INFORMATION

Salesperson: \_\_\_\_\_

Business Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Shipping Address: (if different) \_\_\_\_\_

Date Established: \_\_\_\_\_ Tax ID#: \_\_\_\_\_

Tax Exempt: ( ) Yes ( ) No

If YES, must provide a current Tax Exempt Certificate.

Other Names, if any, under which you have been granted credit: \_\_\_\_\_

#### OWNERSHIP/CONTACT INFORMATION

( ) Corporation ( ) Partnership ( ) Proprietorship ( ) Other: \_\_\_\_\_

President: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_

Accounts Payable/Controller: \_\_\_\_\_

Email Address or Fax Number for Billing: \_\_\_\_\_

#### PHILADELPHIA BRANCH

701a Ashland Ave. Bay 103  
Folcroft, PA 19032  
Phone: 610-521-3404  
Fax: 610-521-4717

#### HARRISBURG BRANCH

7917 Derry St.  
Harrisburg, PA 17111  
Phone: 717-458-5610  
Fax: 717-458-5613

#### PITTSBURGH BRANCH

770 Vista Park Dr.  
Pittsburgh, PA 15205  
Phone: 412-259-8449  
Fax: 412-291-3188

#### BALTIMORE BRANCH

717 Hammonds Ferry Rd.  
Linthicum Heights, MD 21090  
Phone: 410-589-3369

### BANK REFERENCES

Bank Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Account Number(s): \_\_\_\_\_

Checking: \_\_\_\_\_ Savings: \_\_\_\_\_ Loan: \_\_\_\_\_

Person to Contact/Title: \_\_\_\_\_

### MAJOR TRADE REFERENCES (NEED 3)

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Person to Contact/Title: \_\_\_\_\_

Account Number: \_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Person to Contact/Title: \_\_\_\_\_

Account Number: \_\_\_\_\_

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Person to Contact/Title: \_\_\_\_\_

Account Number: \_\_\_\_\_

### PLEASE PROVIDE A COPY OF W-9 WITH THIS APPLICATION

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SERVING THE MID-ATLANTIC SINCE 1986

PROFASTINC.COM | 1.800.243.3418

# CREDIT APPLICATION

TERMS: In consideration of Pro-Fast Inc. extending credit to the Applicant, the Applicant Agrees to pay for all items delivered or services rendered to, or at the request of, the Applicant, in accordance with the terms of each Invoice. Applicant agrees that each of the terms and conditions of sale stated on the invoices shall be a term of the contract of each sale from Pro-Fast Inc. to the Applicant. Applicant acknowledges that a monthly service charge of the highest amount legally allowed in the state shall be made on all sums due Pro-Fast Inc. which have not been paid by the 30th day of the month following billing, and Applicant agrees to promptly pay said service charge. An additional service charge, computed on the same basis, will be due and payable every thirty (30) days thereafter. Waiver of any one or more service charges shall not be deemed to be a waiver of future service charges. Applicant further agrees that with regard to such service charges, Applicant and Pro-Fast Inc. are parties to a written commercial contract. Should it be necessary to place the account with a collection agency or attorney, the Applicant agrees to pay all collection costs and attorney fees in addition to all other sums due. Applicant authorizes Pro-Fast Inc. to obtain credit and financial information concerning the Applicant at any time and from any source. The undersigned warrants that the above agreement has been carefully read and that Applicant understands completely. Applicant also warrants that all information is true and correct. By applying for credit, you assume the above terms.

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Sign: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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