

ACCOUNT INFORMATION & APPLICATION FOR CREDIT

Please fill in all spaces in type or print. Include a current copy of the company's W9 and current tax exemption forms if applicable.

Name of Company:	Phone Number:	
Billing Address:	Shipping Address:	
City/State/Zip:	City/State/Zip:	
Type of Business:	Date Established:	
Accounts Payable Contact:	Accounts Payable Phone Number:	
Accounts Payable Email:	Fax Number:	
Invoices and Statements will be sent via email unless otherwise specified		
Tax Exempt: Yes No	Resale Number:	
Type of Corporation: Corporation Partnership	LLC Sole Proprietor	
Federal EIN Number:	ProFast Representative:	
Cuadit Tarma 9 Line	it Degreet	
Credit Terms & Limit Request		
If approved, our standard credit terms are Net 30 . Payment is due in full 30 days from the date of the invoice.		
Please indicate your requested credit limit: \$		
Final credit terms and limits are subject to review and approval by our credit department. *If payment is made by credit card, please note that a 3.5% credit card processing fee will apply.		
Bank References		
Name of Bank:	Phone Number:	
Billing Address:	Officer or Contact:	
City/State/Zip:		
Trade References		
Name of Company:	Account Number:	
Billing Address:	Phone Number:	
City/State/Zip:	Contant Name:	
Contact Email:		

Phone: 610-521-3404 Fax: 610-521-4717 7917 Derry St, Suite 10 Harrisburg, PA 17111 Phone: 717-458-5610 Fax: 717-458-5613 770 Vista Park Drive Pittsburgh, PA 15205 Phone: 412-259-8449 Fax: 412-291-3188

Suite A Linthicum Heights, MD 21090 Phone: 410-589-3369



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Trade References Continued	
Name of Company:	Account Number:
Billing Address:	
City/State/Zip:	Contant Name:
Contact Email:	
Name of Company:	Account Number:
Billing Address:	Phone Number:
City/State/Zip:	Contant Name:
Contact Email:	
Terms and Conditions	
all items delivered or services rendered to, of each Invoice. Applicant agrees that each be a term of the contract of each sale from monthly service charge of the highest amout Pro-Fast Inc. which have not been paid by to promptly pay said service charge. An add and payable every thirty (30) days thereafted deemed to be a waiver of future service charges, Applicant and Pro-Fast Inc. are payable the account with a collection agency attorney fees in addition to all other sums of financial information concerning the Application that the above agreement has been careful	extending credit to the Applicant, the Applicant Agrees to pay for or at the request of, the Applicant, in accordance with the terms of the terms and conditions of sale stated on the invoices shall Pro-Fast Inc. to the Applicant. Applicant acknowledges that a untilegally allowed in the state shall be made on all sums due the 30th day of the month following billing, and Applicant agrees ditional service charge, computed on the same basis, will be due er. Waiver of any one or more service charges shall not be arges. Applicant further agrees that with regard to such service arties to a written commercial contract. Should it be necessary to or attorney, the Applicant agrees to pay all collection costs and due. Applicant authorizes Pro-Fast Inc. to obtain credit and ant at any time and from any source. The undersigned warrants ly read and that Applicant understands completely. Applicant and correct. By applying for credit, you assume the above terms.
Signature:	Title

Printed Name:

Date: _____