



FORM • FIT • FUNCTION

ALL INFORMATION ON THIS FORM IS STRICTLY CONFIDENTIAL FOR CREDIT PURPOSES ONLY.

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CREDIT APPLICATION

APPLICATION MUST BE COMPLETED IN ITS ENTIRETY. PLEASE PRINT OR TYPE.

BUSINESS CONTACT INFORMATION

COMPANY NAME:

SHIP TO ADDRESS:

CITY: ST: ZIP:

BILL TO ADDRESS:

CITY: ST: ZIP:

PHONE: FAX:

WEB SITE ADDRESS:

TYPE OF BUSINESS: YEARS IN BUSINESS:

CREDIT REQUESTED (PER MONTH): \$ DUNS NUMBER:

TAXABLE NON-TAXABLE TAX EXEMPT NUMBER:

IF TAX EXEMPT, CERTIFICATE MUST BE ATTACHED TO (OR FAXED WITH) APPLICATION TO QUALIFY.

PLEASE CHECK ONE:

SOLE PROPRIETORSHIP PARTNERSHIP LLC

CORPORATION STATE INCORPORATED IN:

FOR PROPRIETORSHIP, PARTNERSHIP OR CORPORATION, IF APPLICABLE:

NAME OF OWNER, PARTNERS OR PRESIDENT: SOCIAL SECURITY NUMBER: ADDRESS: CITY: ST: ZIP:

NAME OF OWNER, PARTNERS OR PRESIDENT: SOCIAL SECURITY NUMBER: ADDRESS: CITY: ST: ZIP:



BANK REFERENCES

BANK NAME: _____
 CONTACT NAME: _____ ACCOUNT # : _____
 ADDRESS: _____
 CITY: _____ ST: _____ ZIP: _____
 PHONE: _____ FAX: _____

TRADE REFERENCES

COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ ST: _____ ZIP: _____
 PHONE: _____ FAX: _____
 ACCOUNT NUMBER: _____

COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ ST: _____ ZIP: _____
 PHONE: _____ FAX: _____
 ACCOUNT NUMBER: _____

COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ ST: _____ ZIP: _____
 PHONE: _____ FAX: _____
 ACCOUNT NUMBER: _____

COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ ST: _____ ZIP: _____
 PHONE: _____ FAX: _____
 ACCOUNT NUMBER: _____

PERSON(s) TO CONTACT:

PURCHASING: _____ ACCOUNTS PAYABLE: _____
 PHONE: _____ PHONE: _____
 EMAIL: _____ EMAIL: _____
 ARE PURCHASE ORDERS REQUIRED? YES _____ NO _____

UPON APPROVAL OF THIS APPLICATION, PAYMENT IS DUE AND PAYABLE IN FULL ACCORDING TO THE TERMS AS STATED ON 3F FABRICATION, LLC INVOICE(S). SHOULD I / WE NOT PAY 3F FABRICATION, LLC ACCORDING TO TERMS, IT IS UNDERSTOOD THAT CREDIT PRIVILEGES MAY BE WITHDRAWN. NO CHARGE WILL BE MADE IF ACCOUNT IS KEPT CURRENT. SHOULD 3F FABRICATION, LLC FIND IT NECESSARY TO OBTAIN ASSISTANCE IN COLLECTING ANY PAST DUE BALANCE(S), I / WE AGREE TO PAY DELINQUENCY CHARGES AT THE RATE OF 1.5% (18% APR) PER MONTH OR SUCH OTHER RATE ALLOWED BY STATE LAW, REASONABLE ATTORNEY FEES, COLLECTIONS FEES AND COURT COSTS REQUIRED TO COLLECT DEBTS OWED TO 3F FABRICATION, LLC, AS ALLOWED BY STATE LAW.

I / WE AGREE TO THE TERMS AND CONDITIONS LISTED AND AUTHHORIZE THE ABOVE REFERENCES AND FINANCIAL INSTITUTIONS TO RELEASE INFORMATION THAT WOULD BE RELEVANT TO ESTABLISHING CREDIT WITH 3F FABRICATION, LLC. IT IS UNDERSTOOD THAT ANY SUCH CREDIT INFORMATION WILL BE HELD IN STRICT CONFIDENCE AND USED ONLY IN CONSIDERATION OF THIS APPLICATION.

 AUTHORIZED SIGNATURE DATE
 PRINT NAME HERE:▶

 AUTHORIZED SIGNATURE DATE
 PRINT NAME HERE:▶

INTERNAL USE ONLY

Credit Approved: _____ Terms: _____ Account #: _____
 Anticipated Initial Credit Limit: _____ Pymt Code: _____ Approved By: _____
 Territory #: _____ Sales Code: _____ COMPUTER UPDATED: _____
 Credit Denied: _____
 Reason For Denial: _____ CREDIT MANAGER'S INITIALS: _____