



**APPLICATION FOR CREDIT** **E-MAIL: accounting@vexcon.com**

**SECTION A:**

CORPORATION: \_\_\_\_\_  
NAME FEDERAL TAX ID

\_\_\_\_\_ ( ) \_\_\_\_\_  
ADDRESS CONTACT PHONE NUMBER

\_\_\_\_\_ ( ) \_\_\_\_\_  
CITY STATE ZIP FAX NUMBER

PRESIDENT \_\_\_\_\_ E-MAIL \_\_\_\_\_

VICE-PRESIDENT \_\_\_\_\_ TREASURER \_\_\_\_\_

CONTROLLER \_\_\_\_\_ BUYER \_\_\_\_\_

ACCTS. PAYABLE CONTACT \_\_\_\_\_ CREDIT REQUESTING \_\_\_\_\_

IS THIS BUSINESS A:  BRANCH  SUBSIDIARY  DIVISION  NOT APPLICABLE

\_\_\_\_\_ CONTACT NAME  
PARENT COMPANY

\_\_\_\_\_ ( ) \_\_\_\_\_  
ADDRESS CONTACT PHONE NUMBER

\_\_\_\_\_ ( ) \_\_\_\_\_  
CITY STATE ZIP FAX NUMBER

\_\_\_\_\_ CONTACT E-MAIL

DUN AND BRADSTREET RATING: \_\_\_\_\_ TAX EXEMPT #: \_\_\_\_\_

FINANCIAL STATEMENTS ATTACHED- \_\_\_\_\_ TAX EXEMPT CERTIFICATE MUST BE ATTACHED \_\_\_\_\_

**SECTION B:**

NUMBER OF EMPLOYEES: \_\_\_\_\_ YEAR INCORPORATED \_\_\_\_\_ STATE INCORPORATED \_\_\_\_\_

PRIMARY NATURE OF BUSINESS: \_\_\_\_\_

**BANK INFORMATION:**

BANK NAME: \_\_\_\_\_ OFFICER: \_\_\_\_\_

ADDRESS 1: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

CHECKING ACCOUNT NUMBER (S): \_\_\_\_\_

LOAN NUMBERS \_\_\_\_\_

**TRADE REFERENCES:(ATTACH STANDARD FORM IF AVAILABLE)**

1. NAME: \_\_\_\_\_  
ADDRESS (1) \_\_\_\_\_  
ADDRESS (2): \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
ACCOUNT NO.: \_\_\_\_\_  
CONTACT NAME: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

2. NAME: \_\_\_\_\_  
ADDRESS 1: \_\_\_\_\_  
ADDRESS 2: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
ACCOUNT NO.: \_\_\_\_\_  
CONTACT NAME: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

3. NAME: \_\_\_\_\_  
ADDRESS (1) \_\_\_\_\_  
ADDRESS (2): \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
ACCOUNT NO.: \_\_\_\_\_  
CONTACT NAME: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

4. NAME: \_\_\_\_\_  
ADDRESS 1: \_\_\_\_\_  
ADDRESS 2: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
ACCOUNT NO.: \_\_\_\_\_  
CONTACT NAME: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

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**SECTION C: TERMS AND CONDITIONS:**

- COMPANY MAY MODIFY OR TERMINATE ANY CREDIT GRANTED TO APPLICANT AT ANY TIME AND WITHOUT NOTICE
- APPLICANT AGREES TO PAY ALL AMOUNTS DUE BY THE DUE DATE AS STATED ON INVOICE.
- Past due accounts are subject to a 1 ½% per month service charge or the maximum allowable legal amount, which ever is lower.
- COMPANY MAY WITHHOLD SHIPMENT OF PRODUCT DUE TO NON-PAYMENT OF INVOICE(S).
- IN THE EVENT OF DEFAULT OR LITIGATION APPLICANT/CUSTOMER AGREES TO PAY ALL COSTS OF COLLECTION INCURRED INCLUDING ATTORNEY FEES.
- All products are sold subject to Vexcon's published materials Limited Warranty and Terms and Conditions of Sale and can be changed without notice. You may view our Warranty's and Terms and Conditions of Sale at [vexcon.com](http://vexcon.com).
- APPLICANT AGREES TO LITIGATE ALL DISPUTES IN COURTS IN JURISDICTION OF COMPANY'S LOCATION IN PHILADELPHIA, PA.

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**SECTION D:**

CUSTOMER SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

I AM AUTHORIZED ON BEHALF OF THE COMPANY LISTED ON THIS APPLICATION TO APPLY FOR CREDIT AND TO AGREE TO THE ABOVE TERMS AND CONDITIONS.

COMPANY NAME: \_\_\_\_\_

DATE SIGNED: \_\_\_\_\_