

Credit Application

To open an account, complete this application and send to **Fax: 1-800-482-4059** or **Email: sales@ServicesForPlastics.com**

Company Name: _____

Mailing/Billing Address: _____ Shipping Address: _____

Phone: _____ Phone: _____

Fax: _____ Fax: _____

Company Category: Molder Extruder Mold Maker Distributor Other _____

Type of Business: Corporation Partnership Sole Proprietorship Personal

Please check all purchasing options that are accepted/used by your company:

Purchase Order Numbers Verbal Purchase Orders Credit Cards Other _____

Federal ID #/SS #: _____ Dun & Bradstreet #: _____

Sales Tax #: _____

Date Business Established: _____ Total Number of Employees: _____

President: _____ Vice President: _____

Buyer: _____ Controller: _____

Accounts Payable Contact: _____ Accounts Payable Email: _____

Name of Financial Institution: _____

Address: _____

Phone: _____ Fax: _____

******PLEASE DO NOT PROVIDE PLASTIC RESIN SUPPLIERS AS REFERENCES******

Name of Business Reference: (NO PLASTIC RESIN SUPPLIERS) _____

Address: _____

Phone: _____ Fax: _____

Name of Business Reference: (NO PLASTIC RESIN SUPPLIERS) _____

Address: _____

Phone: _____ Fax: _____

Name of Business Reference: (NO PLASTIC RESIN SUPPLIERS) _____

Address: _____

Phone: _____ Fax: _____

By signing this form, you are agreeing to comply with the terms and conditions as set forth by Services for Plastics, Inc. The information you have provided above will be used by us to assess your credit. Under open account terms, all purchases are subject to credit approval and are due and payable, in U.S. funds, within 30 days from the date of invoice. A finance charge of 1.5% per month (18% per annum) plus attorney fees and all costs associated with collection will be added to all past due accounts. We reserve the right to deny open account terms to any company.

***NOTE: This application must be signed, dated and returned with all required credit information.**

Authorized Signature: _____ Date: _____

FOR OFFICE USE ONLY - PLEASE DO NOT WRITE IN THIS BOX

Account Number: _____ D&B Checked: _____ References Checked: _____ Approved _____

