

CREDIT APPLICATION

PLEASE COMPLETE IN FULL

FORM MFG
149 Harvest Drive
Coldwater, Ohio 45828
419.763.1030
4MMFG.COM



FORM
[MFG]

COMPANY NAME					
PHONE NUMBER		FAX NUMBER			
SHIPPING ADDRESS					
CITY		STATE		ZIP	
BILLING ADDRESS					
CITY		STATE		ZIP	

PLEASE CHECK ONE CORPORATION PARTNERSHIP INDIVIDUAL

FEDERAL TAX ID #		D&B #			
YR STARTED BUSINESS		STATE OF INCORPORATION			
DESCRIPTION OF BUSINESS					
		NUMBER OF EMPLOYEES			
ANTICIPATED ANNUAL PURCHASES	\$	REQUESTED CREDIT LINE	\$		
ACCOUNTS PAYABLE CONTACT					
PHONE NUMBER					
COMPANY OFFICER			PRESIDENT		
			VICE PRESIDENT		
			CONTROLLER / TREASURER		
SALES TAX EXEMPT	<input type="checkbox"/> NO	<input type="checkbox"/> YES	EXEMPT #		

CERTIFICATE MUST ACCOMPANY FAXED APPLICATIONS,
ORIGINAL CERTIFICATE TO BE MAILED

PLEASE NOTE: Form Manufacturing, LLC terms of sale are **NET 30 DAYS** from invoice date. Finance charges are assessed at the rate of **1½ %** per month on payments received late. All outside collection fees are the responsibility of the purchaser.

REMIT TO THE ADDRESS AS FOLLOWS:	FORM MANUFACTURING, LLC 149 HARVEST DRIVE COLDWATER, OH 45828
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Please complete page two or attach your own list of references: ONE Bank Reference and a minimum of **THREE** Trade References are required for processing. Information received by Form Manufacturing, LLC is treated with strict confidence and is used only for establishing credit levels for the applicant.

All of the above information and attached correspondence included with the application is accurate to the best of my knowledge:

AUTHORIZED SIGNATURE _____

TITLE _____ DATE _____

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PLEASE COMPLETE THE FOLLOWING, **INCLUDING FAX NUMBERS**

REFERENCE LIST FOR	
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COMPANY NAME

BANK

NAME				
ADDRESS				
CITY		STATE		ZIP
ACCOUNT NUMBER				
CONTACT				
PHONE #		FAX #		

TRADE

NAME				
ADDRESS				
CITY		STATE		ZIP
CONTACT				
PHONE #		FAX #		

TRADE

NAME				
ADDRESS				
CITY		STATE		ZIP
CONTACT				
PHONE #		FAX #		

TRADE

NAME				
ADDRESS				
CITY		STATE		ZIP
CONTACT				
PHONE #		FAX #		

TERMS OF AGREEMENT

The undersigned expressly agrees to make payment in full to Form Manufacturing, LLC for all purchases in accordance with terms of sale.

Should the undersigned default in any such payment, the undersigned agrees to pay a late service charge on any amounts in default at the maximum rate permitted by law, and at the option of Form Manufacturing, LLC all amounts owed by the undersigned shall become immediately due and payable without further demand of notice.

The undersigned further agrees to pay a reasonable attorney's fee and all other costs and expenses incurred by Form Manufacturing, LLC in the collection of any obligation of the undersigned pursuant hereto. This agreement shall become effective when accepted by an authorized Form Manufacturing, LLC representative. The undersigned shall not transfer or assign this agreement without expressed prior written consent of Form Manufacturing, LLC.

The undersigned personally guarantees payment for all materials purchased by the above applicant.

The undersigned hereby authorizes the above mentioned banks and business references to release the information requested by:

COMPANY _____
 BY _____
 TITLE _____
 TELEPHONE _____
 SIGNATURE _____ DATE _____

Please fax completed application to **419-678-1403**, or email to **AMYQ@SIGNATURE4.COM**.

<i>FOR FORM MANUFACTURING USE ONLY</i>					
CREDIT APPROVED	<input type="checkbox"/> YES	<input type="checkbox"/> NO	CREDIT LIMIT	\$	
APPROVED BY				DATE	
SALES REP #					