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| --- | --- | --- | --- | --- | --- | --- | --- |
| R.H. Crown Co., Inc.Application for CREDIT | | | | | | | |
| Business Contact Information | | | | | | | |
| Company name: | | | | | | | |
| Title: | | | | | | | |
| Phone: | Fax: | | | E-mail: | | | |
| Registered company address: | | | | | | | |
| City: | | | | State: | | ZIP Code: | |
| Date business commenced: | Partnership: | Corporation: | | | Sole proprietorship: | | Other: |
| Corporation Name(s) of Principal(s) and Address(es) and Phone No: Check here if incorporated within the past 12 months | | | | | | | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| Business and Credit Information | | | | | | | |
| Primary business address: | | | | | | | |
| City: | | | | State: | | ZIP Code: | |
| How long at current address? | | | | | | | |
| Telephone: | Fax: | | | E-mail: | | | |
| Bank name: | | | | Officer: | | | |
| Bank address: | | | | Phone: | | | |
| City: | | | | State: | | ZIP Code: | |
| Type of account: | Account number: | | | | | | |
| Savings |  | | | | | | |
| Checking |  | | | | | | |
| Other |  | | | | | | |
| Business/trade references | | | | | | | |
| Company name: | | | Type of account: | | | | |
| Address: | | | | | | | |
| City: | | | | State: | | ZIP Code: | |
| Phone: | Fax: | | | E-mail: | | | |
| Company name: | | | Type of account: | | | | |
| Address: | | | | | | | |
| City: | | | | State: | | ZIP Code: | |
| Phone: | Fax: | | | E-mail: | | | |
| Company name: | | | Type of account: | | | | |
| Address: | | | | | | | |
| City: | | | | State: | | ZIP Code: | |
| Phone: | Fax: | | | E-mail: | | | |
| Agreement | | | | | | | |
| CREDIT TERMS ARE NET 15 DAYS. Check here if cash sales are okay until credit is approved. We certify that all the information on this form is correct and is given for the purpose of obtaining the extension of credit by seller. In the event credit is extended, the undersigned agrees to the following:   1. To pay for all the purchases pursuant to the terms of seller’s invoices 2. To pay seller a delinquency charge of 1 ½% per month on the amount remaining unpaid 30 days after the date of invoice. 3. To pay reasonable attorney fees incurred by the seller in connection with the enforcement of collection of any obligation of the undersigned to seller. 4. To pay all sums to seller at its address in Fulton County, NY and such county being agreed as the county of venue for any suit brought by either party against the other 5. By submitting this application, you authorize R.H. Crown Co., Inc. to make inquiries into the banking and business/trade references that you have supplied. | | | | | | | |
| Signatures | | | | | | | |
| Title:  Date: | | | | Title:  Date: | | | |

FILL OUT YOUR TAX EXEMPTION FORM NOW