



## CREDIT APPLICATION

### BUSINESS CONTACT INFORMATION

Company name:				
Primary business address:				
City:		State/Country:		ZIP Code:
Date business commenced:		Tax ID:		D&B Number:
Telephone:		Fax:		Email:
A/P Contact Name:		A/P Phone:		A/P Email:
Type of business(check one):	Corporation:	Partnership:	Sole proprietorship:	Other(specify):

### BANK AND CREDIT INFORMATION

Bank name:			Phone:		Fax:
Bank address:			City:	State/Country:	ZIP Code:
Account number:					
Type of account (please check):	Savings:	Checking:	Other (specify):		

### BUSINESS/TRADE REFERENCES

Company name:			
Address:		City:	State/Country:
ZIP Code:	Phone:	Fax:	
Email:			

Company name:			
Address:		City:	State/Country:
ZIP Code:	Phone:	Fax:	
Email:			

Company name:			
Address:		City:	State/Country:
ZIP Code:	Phone:	Fax:	
Email:			

### AGREEMENT

- 1. I hereby authorize CentricsIT, LLC to gather and verify the information I have given to establish credit worthiness. I have agreed to provide financial statements as requested. If applicant is not a corporation, CentricsIT, LLC, is authorized to obtain credit reports about proprietors, partners or principals. I agree to pay all costs of collections or legal fees should such action be necessary due to non-payment. Should credit terms be granted, CentricsIT, LLC, at its sole discretion may at any time cease further extensions of credit to the company. I agree to pay when due according to CentricsIT, LLC, terms all invoices and that past due amounts shall bear the lesser of 1.5% or maximum rate permitted by law until paid.**
- 2. All invoices' are to be paid 30 days from the date of the invoice, unless otherwise indicated in the terms section of said invoice.**
- 3. Claims arising from invoices must be made within 10 business/working days.**
- 4. By signing this application, you authorize CentricsIT, LLC, to make inquiries into the banking and business/trade references you that have supplied.**

SIGNATURES	Credit Information
Signature:	Credit Limit Requested:
Print Name:	Terms:
Title:	Sales Rep:
Date:	Date: