



## CLIENT CREDIT APPLICATION

### BUSINESS CONTACT INFORMATION

Company name		Billing Address	
Contact		City/State/Province/Zip Code	
Main Phone Number		Shipping Address	
Accounting E-mail		City/State/Province/Zip Code	
Purchasing Contact			

### BUSINESS AND CREDIT INFORMATION

Credit or Cash Account	<input type="checkbox"/> Credit <input type="checkbox"/> Cash	Bank name:	
Credit Card Information if selecting cash account		Account number	
Bank Phone			
Bank Fax		Currency	<input type="checkbox"/> Canadian <input type="checkbox"/> US <input type="checkbox"/> Other
Bank E-mail contact		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

### BUSINESS/TRADE REFERENCES

Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
Type of account		Other	



**AGREEMENT**

1. All invoices are to be paid in full 30 days from the date of the invoice, unless prior arrangements for extended terms have been authorized.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Elite Seal Inc. to make inquiries into the banking and business/trade references that you have supplied.
4. Interest will be charged at 2% per month or 24% per year on all invoices over 30 days.
5. NSF checks will incur a \$50 processing charge that will be billed to the clients account.
6. Restocking charges will be determined after Elite Seals has issued an RMA authorization.
7. By signing below I authorize that I am legally able to execute this document and we are agreeing to all terms laid out in the agreement section.

**SIGNATURES**

Signature		Signature	
Name and Title		Name and Title	
Date		Date	