

Pacific Abrasive Supply Company

PASCO

APPLICATION FOR CREDIT

7100 Village Drive, Buena Park, CA, 90621 • (800) 755-2042, (714) 994-2040 • FAX (714) 994-4723

COMPANY LOCATION:

Business Name: _____

Billing Address: _____

Shipping Address _____

Phone () _____

FAX () _____

Line of Business

Line of Business: _____ Years in Business: _____ At This Location: _____

Company is Corporation

Proprietorship

Partnership

If a corporation, date incorporated: _____ In which State: _____

If a subsidiary list parent company: _____

Ownership

Owner / President: _____

Vice President / Manager: _____

Secretary / Treasurer: _____

Person responsible for Accounts Payable: _____

Purchasing Agent: _____

Trade References (Complete name, address, and phone number) list 4.

1 _____ 2 _____

() _____

() _____

3 _____ 4 _____

() _____

() _____

Bank Reference

Name: _____

Address: _____

Phone () _____

Account Number _____

I (We) hereby authorize the above listed bank and credit references to release information to Pacific Abrasive Supply Company, for use in evaluation of this credit request. I (We) agree to comply with your terms of 1%-10 days, NET 30 and to pay interest of 1-1/2% per month on all past due invoices. I (We) further agree to pay reasonable attorney fees of not less than 25% of the balance due, if the account is turned over for collection or a suit is filed. Applicant hereby consents to the jurisdiction of the Orange County courts, State of California, and that seller shall be entitled to court costs. In consideration of extending credit to your company / corporation, I personally guarantee prompt, primary and immediate payment of any sums or credit advance pursuant to this agreement.

Date

Signed (Must be signed by Owner / Officer)

Signed

Title

Title