

Credit Application and Agreement

Sales Person: _____

--- Since 1948 ---

A. APPLICANT									
Legal Business Name:									
D/B/A's, Trade Names, Divisions or Subsidiaries:									
Mailing Address:									
City:		State:		Zip:		County:			
Ship to Address:									
City		State:		Zip:		County:			
Email:									
Phone:					Alt Phone:				
Description of Business Activities:									
How Long in Business:				Estimated Annual Sales:				Credit Amount Requested:	
Purchasing Contact Name:					Purchasing Phone:				
Purchasing Email:									
A/P Contact Name:					A/P Contact Phone:				
A/P Contact Email:									
Do you require a monthly statement? <input type="checkbox"/> Yes <input type="checkbox"/> No				Do you require a Purchase Order? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Email Address to Receive Invoices:					(or) <input type="checkbox"/> Opt. Out of Emailed Invoices (Receive Mailed Copy)				
<input type="checkbox"/> Grant Online Access - Contact Name:									
Contact Email:					Contact Phone:				
B. BUSINESS INFORMATION									
<input type="checkbox"/> Sole Proprietorship		Owner:					SSN:		
<input type="checkbox"/> Partnership		Partner:					SSN:		
		Partner:					SSN:		
<input type="checkbox"/> Corporation/LLC		President Member:					SSN:		
		Vice President/Member:					SSN:		
		Secretary/Member:					SSN:		
		Treasurer/Member:					SSN:		
Federal Tax Number (if applicable):									
Sales Tax Exemption Certificate?		<input type="checkbox"/> Yes (Enclose signed certificate or copy.) <input type="checkbox"/> No							

C. BANKING INFORMATION

Bank Name:		Branch:		Bank Phone:	
Bank Address:		City:		State:	Zip:
Officer Name:					
Account Number:		Account Type:			
Account Number:		Account Type:			

I hereby authorize bank named above to release requested information for the purpose of obtaining and or reviewing credit.

D. TRADE REFERENCES (Please provide 3 references.)

1.

2.

3.

The preceding information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Welders Supply Company of Louisville, Inc. to investigate all references and customary credit information sources including consumer credit reporting repositories regarding my/our credit and financial responsibility for the purpose of obtaining credit and for periodic review for the purpose of maintaining the credit relationship.

CREDIT TERMS: All invoices are due and payable in full amount of the purchase price of the Goods and the Gas Product on or before thirty days from the date of the invoice for that amount in which the Goods and/or Containers are delivered. No discount of the purchase price shall be allowed. SELLER SHALL IMPOSE A LATE CHARGE EACH MONTH ON THAT PORTION, IF ANY, OF THE PURCHASE PRICE OF THE GOODS AND THE GAS PRODUCT WHICH WAS NOT PAID WHEN DUE, EQUAL TO THE LESSER OF (a) 1 ½% PER MONTH (ANNUAL PERCENTAGE RATE OF 18%), OR (b) THE MAXIMUM RATE (IF ANY) WHICH MAY BE CHARGED UNDER APPLICABLE LAW.

CREDIT POLICY: COD restrictions may be placed on any past due account. Accounts who continue delinquency will be subject to having orders held for review/approval.

VENUE: All amounts due for purchases from Welders Supply Company of Louisville, Inc. are payable at **331 Boxley Avenue, Louisville, KY 40209**. It is further agreed that this agreement is entered into in the state of Kentucky and is governed by the laws of the state of Kentucky.

CHANGE OF OWNERSHIP: I/We understand that we must notify Welders Supply Company of Louisville, Inc. in writing and by certified mail of any change in ownership, the name of the business or structure of the business under which credit is established. In the event of default, and if this account is turned over to an agency and/or attorney for collection, the undersigned agrees to pay all reasonable attorney fees, and/or costs of collection whether or not suit is filed.

I/We certify that this request is for the extension of credit for business purposes only and not for the extension of credit for personal, family, or household purposes.

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY, AND WILLINGNESS TO PAY IN ACCORDANCE WITH ABOVE TERMS:

Business Name:			
By:		Title:	
By:		Title:	

CONSENT TO OBTAIN CONSUMER CREDIT REPORT

The undersigned individual who is either a principal of the credit applicant or a sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above-named business credit grantor, from time to time as may be needed, in the credit evaluation process.

Print Name		Sign Name:		Date:	
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