

LEWIS COUNTY CHEMICAL CREDIT APPLICATION

BUSINESS CONTACT INFORMATION

Title		Date business commenced	
Company name		Sole proprietorship	
Phone Fax		Partnership	
E-mail		Corporation	
Registered company address City, State ZIP Code		Other	

BUSINESS AND CREDIT INFORMATION

City, State ZIP Code		Bank name:	
How long at current address?		Primary business address City, State ZIP Code	
Phone		Phone	
Fax		Account number	
E-mail		Type of account	Savings Checking 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	Savings Checking Other	Other	

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize to make inquiries into the banking and business/trade references that you have supplied.
4. Accounts not paid in 30 days are subject to 1.5% per month finance charges
5. Customer understands that overdue and unpaid accounts are subject to collections and legal action.

SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	

Please complete and Fax to (360)740-1622