



CREDIT APPLICATION

Complete Legal Name _____ D/B/A _____

Billing Address _____

Telephone # _____ Fax # _____

Officers _____

Type of Entity _____ Years in Business _____

If Incorporated, State of Incorporation and Date _____

Dun & Bradstreet Number if Listed _____

BANK REFERENCES

Name _____ Contact _____

Address _____ Phone _____

Type of Account _____ Account # _____

TRADE REFERENCES

1. Name _____ Contact _____ Phone _____

Address _____ Account # _____ Fax _____

2. Name _____ Contact _____ Phone _____

Address _____ Account # _____ Fax _____

3. Name _____ Contact _____ Phone _____

Address _____ Account # _____ Fax _____

In order to evaluate your company for credit, current financial statements MUST be submitted with this application. Please allow 10 - 15 business days for the processing of this application.

Should credit be granted and should the account subsequently be assigned for collection, or if Industrial Computers, Inc. or its Agent initiates suit, the applicant agrees to pay all reasonable collection and attorney fees, including, court costs.

By signing below, I hereby acknowledge that the information provided is correct and current. I authorize that the trade and bank references listed above may provide information to Industrial Computers, Inc. as requested in the course of regular credit investigation.

Authorized Signature _____ Date _____

Print Name and Title _____



INDUSTRIAL COMPUTERS, INC.

BANK RELEASE AUTHORIZATION

I hereby authorize our bank(s) to release any information necessary to assist in establishing a line of credit with Industrial Computers, Inc.

Firm Name

Address

City, State, Zip

Authorized Signature

Printed or Typed Name

Title



This certificate is invalid unless all four sections are completed by the purchaser.

Section 1: Check one of the following:

- One time purchase
- Blanket certificate¹

The purchaser hereby claims exemption on the purchase of tangible personal property and selected services made under this certificate from: Industrial Computers, Inc. and certifies that this claim is based upon the purchaser's proposed use of the items or services, or the status of the purchaser:

Section 2: Items covered by this certificate:

- All Items purchased
- Limited to the following items: _____.

Section 3: Basis for exemption claim:

Resale

- At Retail – Sales Tax Registration Number: _____.
- At Wholesale – No Number Required
- Agricultural Production: (Describe) _____.
- Industrial Processing

Non-Profit Organizations

- Government Entity, Nonprofit School, Nonprofit Hospital, and Church (circle type of organization)
- Internal Revenue Code Section 501(c)(3) and 501(c)(4) Organizations
- Exempt letter from the State of Michigan
- Other (explain): _____.

Section 4: Certification:

In the event this claim is disallowed, the purchaser promises to reimburse the seller for the amount of tax involved.

Purchaser	Street Address
Area Code/Telephone No.	City/State/Zip Code
Signature and Title	Date Signed
Name (Print of Type)	

¹A blanket certificate is valid for three years from date of signature unless an earlier expiration date is listed below:

Expiration date, if less than three years: _____.