

DEPATIE FLUID POWER COMPANY

6256 AMERICAN AVENUE

PORTAGE, MI 49002

PHONE 269-324-2850

APPLICATION FOR CREDIT

FAX 269-324-2870

\$500.00 QUICK APPROVAL

Name of Firm _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Fax # _____

ALL INVOICES WILL BE FAXED. PLEASE INDICATE YOUR ACCOUNTS PAYABLE

FAX # _____

The above named company hereby applies for credit in accordance with the following terms & conditions:

- 1) Terms: Net 30 days from date of invoice. Orders will be held @ 45 days, orders placed on COD @ 60 days
- 2) A return authorization number is required prior to returning goods. Restocking charges may apply to returns
- 3) We do accept: VISA/MASTER CARD, DISCOVER CARD AND AMERICAN EXPRESS
- 4) You agree to pay a service charge of 1.5% per month(which is annual PERCENTAGE RATE of 18%) on any balance which is past due.
- 5) You agree to pay all costs of collection, including actual attorney fees on any account which is past due.
- 6) You grant us a security interest in all goods purchased and authorize us to sign on your behalf such documents as are necessary to perfect our security interest.

OWNERSHIP _____ Corporation _____ Federal ID # _____ Date Established
_____ Other _____

- 1) _____
Name of Principal _____ Phone # _____
- 2) _____
Name of Principal _____ Phone # _____
- 3) _____
Name of Principal _____ Phone # _____

FINANCE

Bank Name, address, phone and contact _____

TRADE REFERENCE

Business Name Phone # Fax # Acct #

Business Name Phone # Fax # Acct #

Business Name Phone # Fax # Acct #

The undersigned certifies all information on this form is correct and fully understands your credit terms. You are authorized to investigate our credit record to the extent you deem necessary and to verify references. The undersigned instructs all entities to furnish any information that they may have in response to your Inquiries.

Date _____ **Sign** _____ **Title** _____