



Customer Credit Application

Date

Bill To

Ship To

Name

Address

City, State

Zip

Phone

Fax

Federal Tax ID

Sales Rep (#) :

D & B #

(greater than \$1,500 requires
Dunn & Bradstreet #)

Division

() Yes () No

Parent Company

Order Information

Part Number

Quantity

Tooling \$

\$

Credit Limit Requested

\$

Signature(s)

Doug Allen

(required)

Francine Tiedman

(required)

Scott Seaholm

(as required)

Customer Credit Application



- *If shipment is required within four weeks, it must be shipped COD*
- *Customer must be notified of any orders scheduled for COD*
- *All new accounts require signature of:*
 - *Sales Manager*
 - *President*
 - *If credit limit is greater than \$ 2,500*