F.E. BENNETT Co.

MATERIAL HANDLING SPECIALISTS

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Fax (503) 288-1708 **→** www. febennett.com









CREDIT APPLICATION AND AGREEMENT

For the purpose of obtaining credit from you, I (we) make the following statement:

BILL TO:			SHIP TO:			
A 11						
C't			O'.			
	Zip		-		Zip	
					•	
Fax ()			Fax ()_			
OWNERSHIP						
Type of Business: _			SIC#			
Individual \square	Sole Proprietor	Partnership	Corporation		LLC 🗆	Other
Federal ID/Social Sec	curity No:					
Year (s) in Business			;		State of Inc	
For Resale (Y/N)		Resale Numbe	er	(Send C	ompleted Certificate)	
	Address of Owne			SS# _		
Address		City		State _	Zip	
Name		Title		SS#		
Address		City		State _	Zip	
Contact Info	rmation					
Main Contact Name	::		Phone ()		ext	11010
E-mail Address:						
Account Payable Co	ontact:		Phone ()		ext	
E-mail Address:		in	voice preferance: M	fail Fav	F-Mail (please circle)	

ınst	itution Name			Contact			
	ress						Zip
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BU	SINESS REFERENC						
1)	Company Name						
							Zip
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	Company Name						
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)	Fax ()	
3)	Company Name						
	Address		City		State _		Zip
4))	Fax ()	
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annu acco Crec with agre	TIME OF PAYMENT after the date of invoice. The am) on the unpaid balance. unts, the exact amount of whe INVESTIGATION AN lit Investigating Agency or the TERMS OF SALE. It is to pay in addition to the fo	/ INTEREST: Upo account will be consi The SERVICE CH tich cannot be other ID COSTS OF CO to the management of however, this accorgoing, any and all	on approval, our TERM idered past due after the HARGE reflects our rwise readily ascertain DLLECTION: I (we) of the above form for ount is not paid as a costs of collection, i	IS OF SALE are NI is period and is subcost of rebilling, ned. agree and author approval and if greed, according to ncluding a reason	ET 30 DAYS, mean oject to a SERVICE processing and corrize that this apple extended credit, let the amount of yable attorney's fee	ing all charence of the charge	rges are due and payable in full of 1 ½% per month (18% per month and note may be referred to an omise to pay my account in fice or statement received, I (wincurred by holder, or if suit leads to the control of the c
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Title: ______
Date: _____

Authorized Signature: