

Credit Application Form

Customer Information	Bank Reference
Company Name: _____	Bank: _____
DBA: _____	Contact: _____
Billing Address: _____	Account #: _____
City, St, Zip: _____	Telephone: _____
Phone: _____ Fax: _____	
Ship To Address: _____	Trade References
City, St. Zip: _____	Supplier: _____
Email: _____	Telephone: _____
Federal Tax ID: _____	Fax No.: _____
Duns#: _____ # Of Employees: _____ Year Est: _____	
Taxable Status <input type="checkbox"/> Tax Exempt <input type="checkbox"/> Taxable	Supplier: _____
<i>If Tax Exempt please forward a copy of your tax exempt certificate.</i>	Telephone: _____
Type Of Business	Fax No.: _____
<input type="checkbox"/> S-Corp. <input type="checkbox"/> LLC <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit	Supplier: _____
Principle Officers or Owners	Telephone: _____
Name: _____ Title: _____	Fax No.: _____
Name: _____ Title: _____	
Ordering Requirements	Supplier: _____
<input type="checkbox"/> Verbal <input type="checkbox"/> Purchase Order Number Only <input type="checkbox"/> A Faxed Copy of the Purchase Order is Required <input type="checkbox"/> Other _____	Telephone: _____
	Fax No.: _____

By signing below, the undersigned hereby warrants, represents and agrees as follows: (a) all information set forth herein is true, correct and complete in all respects, (b) this application is made for the express purpose of inducing CDI or an affiliated company to extend credit to Customer/Applicant, and (c) in the event that CDI (or an affiliate) retains a collection agency and/or institutes any action to collect any indebtedness owing by Customer/Applicant, the Customer/Applicant shall pay to and reimburse CDI (or its affiliate) for any and all costs of collection incurred by CDI (or its affiliate), including but not limited to, collection agency fees, attorneys' fees and all other costs, together with interest on the outstanding amount due and owing from time to time at the rate of one and one-half percent (1-1/2%) per month (but in no event more than the maximum percentage permitted by law) and all court costs for the collection of such amounts. In addition, Customer/Applicant acknowledges and agrees that it hereby (a) grants to CDI (or its affiliate) a security interest in all goods and equipment at any time purchased by the undersigned from CDI and (b) authorizes CDI to prepare and authenticate such security agreements and other documents as may be required by CDI (including insertion product/equipment descriptions) to grant/perfect a security interest in and to any such goods and equipment in favor of CDI (or its affiliate) from time to time. A photocopy or facsimile of this authorization shall be as valid as the original.

Signature: _____ Title: _____ Date: _____
(Authorizing Officer Signature)

(Please Print Name)

A signed copy of this application must be submitted with all requests for open credit. Please fax **completed signed** application to **800-486-4336**.

Office Use Only	
D & B Rating: _____	Terms: _____
Limit: _____	By: _____