



FOR OFFICE USE ONLY	
Approved by:	
Credit Limit:	
Account #:	
Salesman:	
Date Approved:	

**APPLICATION FOR CREDIT
(Partnership/Corporation)**

GENERAL INFORMATION

Company Name: _____	Accounts Payable Contact Name: _____
Delivery Address: _____	Accounts Payable Contact Phone#: (____)____-_____
Billing Address: _____	\$ Credit Limit Requested: _____
City: _____ State: _____ Zip: _____	Has your company ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No
Phone #: (____)____-_____ Fax #: (____)____-_____	If yes, what type of bankruptcy? _____ When? _____
Web Address: _____	Date of Incorporation/Business Started: _____
DUNS #: _____	Federal ID # _____

SPECIAL INSTRUCTIONS

BANKING INFORMATION

<input type="checkbox"/> All transactions must have a purchase order. <input type="checkbox"/> We are tax exempt and are providing a State Tax Exempt Certificate with this application.	Bank Reference Name: _____ Bank Account #: _____ Phone #: (____)____-_____ Fax #: (____)____-_____
---	--

PARTNER/OFFICER INFORMATION

Name 1: _____	Name 2: _____
Title 1: _____ SSN 1: _____	Title 2: _____ SSN 2: _____
Address 1: _____	Address 2: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Name 3: _____	Name 4: _____
Title 3: _____ SSN 3: _____	Title 4: _____ SSN 4: _____
Address 3: _____	Address 4: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____

TRADE REFERENCES

Name: _____	Name: _____
Address: _____	Address: _____
City: _____ State: _____	City: _____ State: _____
Phone #: (____)____-_____ Fax #: (____)____-_____	Phone #: (____)____-_____ Fax #: (____)____-_____
Name: _____	Name: _____
Address: _____	Address: _____
City: _____ State: _____	City: _____ State: _____
Phone #: (____)____-_____ Fax #: (____)____-_____	Phone #: (____)____-_____ Fax #: (____)____-_____





AGREEMENT

I/We agree to pay for all the charges to our account under the following terms and conditions.

Purchases must be paid within thirty (30) days of the invoice date. In the event of default of any payment that comes due, I/We agree to pay interest at the rate of 1½% per month on the balance owing, from the date of invoice.

Applicant hereby authorizes Volunteer Welding Supply, Inc. to contact credit reporting agencies as well as any or all banks, credit references and/or trade references listed herein and further authorizes said banks, credit references and/or trade references to provide information requested by Volunteer Welding Supply, Inc. in order to evaluate this application.

I/We represent, as the applicant herein, that all debits are currently being paid in the normal course of business as they become due, and no insolvency exists as defined in the Bankruptcy Reform Act of 1980, and that all orders will cease should this condition as to insolvency become incorrect.

All cylinders and related equipment rented from Volunteer Welding Supply, Inc. must be returned if your business is sold or closed or if you declare Bankruptcy. All cylinders belonging to Volunteer Welding Supply, Inc. may not be transferred to any other person or business unless an agreement is signed between Volunteer Welding Supply, Inc. and the new owner. The original owner will be held personally responsible. Applicant agrees to immediately notify Volunteer Welding Supply, Inc. in writing, if their business changes status in any way (new owner, incorporation, loss of partner, change in banks, etc.)

In the event that suit is filed to enforce payment of all sums due under this agreement, I/We agree to pay reasonable court costs and attorney fees. Further it is agreed that in the event suit is filed to enforce payment, the venue will be in the County of Davidson, State of Tennessee.

Signature: _____ Date: _____

Signature: _____ Date: _____

PERSONAL GUARANTEE FOR CORPORATE DEBT

In consideration for credit that may be granted by Volunteer Welding Supply, Inc. to the above named applicant corporation, I/We, the undersigned, agree to further and wholly guarantee any debt incurred by _____ or its agents, and I/We agree to the terms listed in the above agreement.

This personal guarantee for corporate debt may be revoked by the undersigned upon thirty days written notice to Volunteer Welding Supply, Inc. of the undersigned intention to revoke said personal guarantee.

The undersigned shall remain liable for any charges incurred with Volunteer Welding Supply, Inc. prior to the end of said thirty day period.

All corporate officers must sign:

Guarantor: _____ Print Name: _____ Date: _____	Guarantor: _____ Print Name: _____ Date: _____
Guarantor: _____ Print Name: _____ Date: _____	Guarantor: _____ Print Name: _____ Date: _____

Please fax completed application to Phillip Jones @ 242-7836