

AMERICAN METALCRAFT  
28 ANDREW WAY  
VILLA RICA, GA 30180

HOLLY GOTFREDSON – ACCT MGR  
holly@finishingdynamics.com  
404-226-8538 DIRECT 678-840-3787 - FAX

## APPLICATION FOR CREDIT

LEGAL NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

ACCTS PAYABLE CONTACT: \_\_\_\_\_ TEL # \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLICANT IS A: (MARK ONE OF THE FOLLOWING)

(\_\_\_\_) CORPORATION Date Incorp \_\_\_\_\_; (\_\_\_\_) PARTNERSHIP # of yrs \_\_\_\_\_; (\_\_\_\_) SOLE PROPRIETORSHIP # of yrs \_\_\_\_\_

STATE OF INCORPORATION \_\_\_\_\_ FEDERAL TAX ID # \_\_\_\_\_

D&B # \_\_\_\_\_ REQUESTED CREDIT AMOUNT \_\_\_\_\_

ANTICIPATED YEARLY SALES \_\_\_\_\_ FINANCIAL STMT AVAILABLE \_\_\_\_\_/ATTACHED \_\_\_\_\_

NAMES OF PRINCIPAL(S), TITLE(S) AND SOCIAL SECURITY NUMBER(S):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

P.O. REQUIRED? YES (\_\_\_\_) NO (\_\_\_\_) AUTHORIZED BUYER'S NAME \_\_\_\_\_

DOES BUSINESS QUALIFY FOR SALES TAX EXEMPTION: YES (\_\_\_\_) NO (\_\_\_\_)

IF YES, PLEASE INCLUDE CURRENT EXEMPTION CERTIFICATE WITH THIS APPLICATION; IF EXEMPTION CERTIFICATE IS NOT SUPPLIED, SALES TAX WILL BE CHARGED.

NAME OF BANK \_\_\_\_\_ ADDRESS \_\_\_\_\_

BANK CONTACT \_\_\_\_\_ TELEPHONE # \_\_\_\_\_ ACCT # \_\_\_\_\_

TRADE REFERENCE \_\_\_\_\_ TEL # \_\_\_\_\_ FAX # \_\_\_\_\_

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TRADE REFERENCE \_\_\_\_\_ TEL # \_\_\_\_\_ FAX # \_\_\_\_\_

I (WE) HAVE COMPLETED THIS APPLICATION TO OBTAIN CREDIT, AND CERTIFY THAT ALL STATEMENTS THEREOF ARE TRUE AND CORRECT. I (WE) AGREE THAT CREDIT INQUIRIES MAY BE MADE AND AUTHORIZE THE RELEASE OF SUCH INFORMATION TO YOU. I (WE) UNDERSTAND AND AGREE THAT ANY CREDIT GRANTED SHALL BE PAID PROMPTLY IN ACCORDANCE WITH CREDIT GRANTOR TERMS AND AGREEMENTS. I (WE) ALSO UNDERSTAND AND AGREE THAT CREDIT GRANTOR MAY ADD LEGAL RATE OF INTEREST PER MONTH TO ANY BALANCE NOT PAID IN ACCORDANCE WITH SAID TERMS AND AGREEMENTS. I (WE) ALSO AGREE, IN THE EVENT OF DEFAULT, TO PAY REASONABLE COLLECTION CHARGES, ATTORNEY FEES, AND COURT COSTS, WHERE APPLICABLE.

DATE \_\_\_\_\_

PRINTED NAME & TITLE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**PLEASE FAX COMPLETED APPLICATION TO HOLLY GOTFREDSON AT 678-840-3787  
OR EMAIL HOLLY@FINISHINGDYNAMICS.COM**

