

101 Southwestern blvd, Suite 130

Credit Application Form

Please complete, sign, and return this form along with your
Credit References and Financial Statement.
Fax Forms and Purchase Orders to 832-850-2976

Billing Address:							Office Address:					
Company Name						C	Company Name					
Attention						A	Attention					
Street Address						Street Address						
City, State, Zip						City, State, Zip						
Tallankara						Talanhana						
Telephone						Telephone						
Email						Email						
Email						Lindii						
Operation of												
General Information												
Federal Tax ID No.	ederal Tax ID No. Company Composition										Corporation State Of:	
								Sub-Chapt				
` '							e Premises Leased? Amount of Cred				Desired	
			<b>-</b>			☐ Yes ☐ No					N. 0.5.	
Principal / Owner			Title			Ema	าลแ		Phone No. & Extension			
Ordering Information												
Are Written Purchase Orders Required?			Is Merchandise for Resale?				Resale No. (if for resale, please provide Copy of Certificate)					
☐ Yes ☐ No			☐ Yes ☐ No									
Purchasing Agent			Fax				Email			Phone No. & Extension		
Accounts Payable Contact			Fax				Email			Phone No. & Extension		
				В	ank	Info	ormation					
Bank Name			Branch Name E			Conta	tact Officer			Phone No. & Extension		
Bank Address			City		State		Zip	Type of Account and Accou		Account N	lo.	
Terms and Conditions												
All accounts are COD until a credit application has been completed, reviewed, and approved. If any indebtedness incurred pursuant to this request for credit is not												
paid in full when due, the undersigned agrees to pay all costs of collection, including a reasonable attorneys fee. Any balance so remaining unpaid shall bear interest at the lesser rate of 1.5% per month or the maximum rate permitted by applicable law, until paid in full.												
Acceptance and Approval												
Signing this agreement indicates your acceptance of the terms and conditions as stated. In addition, you authorize <b>Safety Gear Pro INC</b> to make any and all inquires necessary to process the Credit Application												
Name of Authorized Representative Tit						itle						
Agreed and Accepted, Signed					Pho	Phone No. & Extension Date						