

Application for Credit Terms

This form must be completed in full and signed by a principal owner, partner, or officer of the company or corporation.

Company Information

Legal Name					
Type of Business			Cre	edit Request	ed
Please indicate if	Corporation _	_ Partnership	Sole	Proprietorsh	nip Individual
Tax ID or SS#				DUNS#	
Year Established	Number of Employees				
Physical Address					
Ship to Address					
Bill to Address					
Accounts Payab	le				
Contact Name				Tel	
Email				Fax	
Alternate Contact Name				Tel	
How do you want to recei	ve your invoices?	E	mail	FAX	Mail
Taxes					
Products for Resale?	No Yes	Resale #			California
Please attached Resale C	Certificate(s)	Resale#			Hawaii
		Resale#			Nevada
Bank Reference					
Bank Name			A	ccount#	
Address				Tel	



Application for Credit Terms

Trade References with Credit Account

Company	Fax			
Contact Name	Tel			
Address				
Company	Fax			
	Tel			
Company	Fax			
Contact Name	Tel			
Address				
Remittance Informa	tion			
Clipper Controls Inc. 660 Berc	ut Drive Sacramento CA 95811			
Electronic Funds Transfer	Account # 8384968833, ABA Routing #121042882 Wells Fargo Bank 285 King St San Francisco CA 94107			
Agreement				
account in Applicant's name ar enable Applicant to purchase nonly. All statements made here Clipper Controls to make any a hereby indemnify Clipper Controls that any account over 30 days (18%APR) on the unpaid balan other costs of collections. A \$3	lipper Controls Inc. (Clipper Controls) to open a commercial charge and hereby requests Clipper Controls from time to time to extend credit to herchandise from Clipper Controls for business or commercial purposes are true and accurate to the best of our knowledge. We authorize and all inquiries necessary for action on this credit application. We rols and its agents from any liability resulting from this application. Note past due is subject to interest charges of 1.5 percent per month acce where allowable by law, as well as attorney's fees, court costs, and as fee will be added to your account in the event a check is returned. Indeed at any time. We agree to abide by the Clipper Controls Terms of controls.com			
Name	Signature			
Title	Date			

Thank you for considering Clipper Controls as a valued vendor. We look forward to serving you!