



PO BOX 10721, GREEN BAY, WI 54307-0721  
 3700 ELM VIEW RD., GREEN BAY, WI 54311 (EXIT 178 ON I-43)



Where quality is a habit and service is a must.

## APPLICATION FOR CREDIT

COMPANY NAME \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
(PLEASE USE EXACT COMPANY NAME)

ADDRESS \_\_\_\_\_ FED I.D.# \_\_\_\_\_  
Street City State Zip

**BANK INFORMATION**

BANK NAME \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_ ACCT NO. \_\_\_\_\_  
Street City State Zip

**If a Proprietor or Partnership, please complete this section:**

Years in Business \_\_\_\_\_ Sales Tax Exempt?  YES  NO (If yes, please complete enclosed Exemption Certificate)  
Proprietor Partnership

**PRINCIPALS:**

Name: _____	Name: _____
Address: _____	Address: _____
City, St, Zip: _____	City, St, Zip: _____
Date Of Birth: _____	Date Of Birth: _____
Social Security #: _____	Social Security #: _____

**If Corporation please complete this section:**

Years in Business: \_\_\_\_\_ Sales Tax Exempt?  YES  NO (If yes, please complete enclosed Exemption Certificate)

	President	Vice President	Secretary	Treasurer
Name				
Address				
City				
State, Zip				
D.O.B.				
Social Security No.				

**Trade References – Banks, Financial Institutions with open accounts:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, St, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Acct No. \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, St, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Acct No. \_\_\_\_\_

**Payment Terms and Conditions:** Upon approval I (we) understand and agree to Dedicated Repair, Inc. credit terms. Invoices are NET 30 Days. A Finance Charge of 1 ½ % per month will be charged on all unpaid amounts. Payment of delinquency charge is not an alternative to payment by the due date. I (we) further agree to pay any collection cost incurred to collect the balance including Reasonable Attorney Fees. If at any time the above applicant company name changes, we agree to send written notice to DEDICATED REPAIR, INC for review and further agree to pay any debt incurred under the new name. For, and in consideration of your extending credit at my request, personally guarantee to you the payment of any obligation of the company. It is understood that this credit request and guaranty shall be continuing for such indebtedness of the company. I do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

For the purpose of obtaining credit described above, and future credit granted to the undersigned by the creditor named above, the undersigned jointly and severally, represent that the above statements are true and complete, authorize the creditor named above, or its agents, to verify them and obtain additional information concerning our credit standing and furnish the same to others, to answer any questions about our credit experience and other financial relationships with the creditor and agree to the provisions of any rules, regulations or agreements of the creditor governing such credit. This application is creditor's property. The undersigned understands that it may be a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, under the provisions of Title 18, United States Code, Section 1014

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

CO- Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**IF YOU ARE TAX EXEMPT, PLEASE COMPLETE ATTACHED "CERTIFICATE OF EXEMPTION"**