

CREDIT APPLICATION

GENERAL INFORMATION:				
Company Name:	DBA:			
Type of Org: Sole Proprietorship Corporation Partnership				
Accounts Payable Contact:	A/P Phone:	:		
Billing Address:	A/P Fax:			
City/State/Zip:	A/P Email: _			
County:	Bus. Phone	:		
Superintendent's Name:	Cell Phone:			
SHIP TO:				
Primary Ship To Address:				
BUSINESS INFORMATION:				
Purchase Orders Required (Please check one) Yes No				
Credit Line Requested: \$ Year Est				
Type of Business: ☐ Landscaping ☐ Lawn Maint. ☐ Resale ☐	Golf Course (Indicate Type Below)			
Tax ID or SSN:				
Tax Exempt? Yes No (If Yes, a certificate of exemption MUST be submitted to avoid tax charges)				
Has the company ever declared bankruptcy? Yes No				
Date: City & State of Filing:				
Are there any outstanding judgements or liens?				
Has the company been named as a defendant in any lawsuits? Yes No				
If you answered "yes" to any of the above, please explain:				
BANK & TRADE REFERENCES:				
Bank Name:	Branch:			
Address:				
Contact: Pho	ne: Fax:			
Checking Account #:	Loan #:			
Trade References (Major Suppliers):				
Company Name Contact Person	Di	Fax		
	Phone			
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IT IS IMPORTANT THAT YOU READ AND UNDERSTAND THE TERMS OF THE CREDIT AGREEMENT SET FORTH ON THE REVERSE SIDE (PAGE 2). YOUR SIGNATURE ON THE FOLLOWING PAGES BINDS YOU TO THE REPRESENTATIONS, TERMS, AND PROVISIONS MADE IN THE ABOVE CREDIT APPLICATION AS WELL AS SAID CREDIT AGREEMENT.



CREDIT AGREEMENT

The applicant certifies that the information authorized to obtain any financial information that it report and/or direct contact with banks and creditors provide copies of tax returns, financial statements, Triangle Chemical Company employs outside service and/or attorney's fees associated with the collection. A service charge equal to 1.5% per month ((less payments received, or credit given during bill outstanding balance as of the 25th day of each mont The Applicant acknowledges that this applicate abide by them upon acceptance and approval of the service of the service and approval of the service authorized that the service and approval of the service authorized that the service authorized that the service are serviced to abide by them upon acceptance and approval of the service authorized that the service authorized the service authorized that the service authorized the service authorized that the service authorized the service authorized that the service authorized that the service authorized the service authorized that the service authorized the service authorized that the service authorized the service authorized the service authorized the service authorized the service authorize	t may require in reviewing and assessing, both past and present, regarding applications or other financial infects to collect delinquent accounts, the union of money owed. The amount of creating cycle). Such service charge shall be the following the month of the initial billing cation has been read and that the Application.	ng this application, including a credit bur- plicant's financial status. Applicant agree ormation as may be required by Triangle indersigned agree(s) to pay all collection of edit extended to Applicant shall not exc inpaid portion of the previous month's bala be computed on such unpaid portion of g date.	reau es to ee. If osts eeed ance the
APPLICANT SIGNATURE	TITI	LE DATE	
	GUARANTY		
For good and valuable consideration, the receipt and sufficiency of which are hereby expressly acknowledged, the undersigned,			
Print Guarantor Name	Date	Signature	
Social Security Number	Address		
Print Guarantor Name	Date	Signature	
Social Security Number	Address		
Sales Representative	Sales ID Number		
Triangle Chemical Company, in reliance up by Applicant, in reliance of the executed Guaranty, hupon the terms set out in this agreement. Triangle Chemical Company By: Date:			ded