



FIRE EQUIPMENT COMPANY

Customer Credit Application

Company Name: _____

Billing Address _____

Address: _____

City/St/Zip _____

City/State/Zip _____

Owners Name _____

A/P Name: _____

Terms Applied For (choose one):

Net 30 _____

Credit Card (keep on file) _____

A/P E-mail: _____

COD _____

A/P Phone: _____

cc # _____

cc expiration _____ Code _____

Are your purchases tax exempt? **Y** **N**
If yes, attach certificate from each state.

Are Purchase Order Numbers Issued? **Y** **N**

How long have you been in business? _____

Trade References (No Utilities or Credit Cards)

1.) Name: _____

2.) Name: _____

Address: _____

Address: _____

E-mail: _____

E-mail: _____

Contact Person: _____

Contact Person: _____

3.) Name: _____

4.) Name: _____

Address: _____

Address: _____

E-mail: _____

E-mail: _____

Contact Person: _____

Contact Person: _____

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (net 30) and agrees to pay a service charge per month of 2% per month (24% annual percentage rate) on all past due balances. **In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred.** The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Print Name: _____

Title: _____

Signature: _____

Date: _____

Please e-mail to jennl@getzfire.com or fax to (309) 673-8456