

## CREDIT APPLICATION

### COMPANY INFORMATION

APPLICATION DATE:

8/17/21

#### CORPORATE BUSINESS ADDRESS

Name:

Address 1:

Address 2:

Phone No.:

#### BRANCH ADDRESS:

(If opening account for a branch(s) location)

Name:

Address 1:

Address 2:

Phone No.:

#### COMPANY HISTORY

Owner(s) Name:

In Business Since:

Total No. of Employees:

Type of Business:

Corporation:

☐

LLC:

☐

LLP:

☐

OTHER:

☐

#### SHIP TO ADDRESS

(If opening account for a branch(s) location)

Business Name:

Address 1:

Address 2:

Phone No.:

#### BILL TO ADDRESS:

(If opening account for a branch(s) location)

Business Name:

Address 1:

Address 2:

Phone No.:

**ACCOUNTING DEPARTMENT**

**Accounts Payable Clerk:**

Phone Number:

Fax Number:

Email Address:

**Accounts Payable Manager:**

Phone Number:

Fax Number:

Email Address:

**PURCHASING DEPARTMENT**

**Purchasing Clerk:**

Phone Number:

Fax Number:

Email Address:

**Purchasing Manager:**

Phone Number:

Fax Number:

Email Address:

**CREDIT REQUEST INFORMATION**

Requested Credit Limit Amt.: (Must be completed) \_\_\_\_\_

Net Terms: **Net 30 days**

Authorization is needed for terms other than indicated.

**ORDER INFORMATION**

Initial Purchase Amount: \$ \_\_\_\_\_

Anticipated Ship Date: \_\_\_\_\_

Anticipated Monthly Purchases: \_\_\_\_\_

Buying For Resale:

Yes

☐

No

☐

Resale No.: \_\_\_\_\_

**\* Please provide copy of Resale Certificate & W-9 Form**

**TRADE INFORMATION (COMPLETE ALL INFORMATION OR ATTACH A TRADE REFERENCE SHEET)**

**Bank References (must supply one)**

If it is necessary, please attach a separate sheet,

|                |       |            |       |
|----------------|-------|------------|-------|
| Bank Name      | _____ | Address    | _____ |
| Telephone #    | _____ | Fax #      | _____ |
| Contact Person | _____ | Bank Acct. | _____ |

**TRADE REFERENCES: (Please provide customer account numbers)**

If it is necessary, please attach a separate sheet,

|                |       |           |       |
|----------------|-------|-----------|-------|
| Vendor Name 1  | _____ | Address   | _____ |
| Telephone #    | _____ | Fax #     | _____ |
| Contact Person | _____ | Acct. No. | _____ |

|                |       |           |       |
|----------------|-------|-----------|-------|
| Vendor Name 2  | _____ | Address   | _____ |
| Telephone #    | _____ | Fax #     | _____ |
| Contact Person | _____ | Acct. No. | _____ |

|                |       |           |       |
|----------------|-------|-----------|-------|
| Vendor Name 3  | _____ | Address   | _____ |
| Telephone #    | _____ | Fax #     | _____ |
| Contact Person | _____ | Acct. No. | _____ |

I hereby represent that I am authorized to submit this application on behalf of the customer named above, and that the information provided for the purpose of obtaining credit and is warranted to be true. I / We hereby authorize Fuji Electric Corp. of America to investigate the references listed pertaining to our credit and financial responsibility. I further represent that the customer applying for credit has the financial ability and willingness to pay all invoices within the established terms.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_