

Credit Application

Company Information

Legal Name:	Website:	
	Phone:	
Address:	Fax:	
	Fed ID Number:	
City:	D&B Number:	
	Year Business Est.:	
State/Province/Postal Code:	No. of Employees:	
	Annual Sales:	
Country:	Payment Method	
	Prepay:	
Please check one:	Credit requested:*	
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> LLC	Amount requested: \$	
Parent Company Name and Address		

Personnel Information

CFO/Controller Name:	Phone (office):
	Email:
Accounts Payable Contact:	Phone (office):
	Email:
Purchasing Contact:	Phone (office):
	Email:

Officers/Partners/Principals

CEO/President/Director/Owner Name:	Phone (office):
Address:	Email:
Vice President:	Phone (office):
Address:	Email:
Treasurer:	Phone (office):
Address:	Email:
Secretary:	Phone (office):
Address:	Email:



Please return to:
 Spectrum Industries, Inc.
 Attn: Credit Department
 Email: info@spectrumfurniture.com
 Fax: 1-715-723-9002

* Trade and Bank References are required when requesting credit. You may attach company trade/bank references in lieu of completing these sections.

Trade References

Please provide trade references

Company Name:	Contact Name:
Location & website address:	Phone & Email:
Company Name:	Contact Name:
Location & website address:	Phone & Email:
Company Name:	Contact Name:
Location & website address:	Phone & Email:
Company Name:	Contact Name:
Location & website address:	Phone & Email:

Bank References

Please provide bank references

Bank Name:	Contact Name:
Account Number:	Phone:
City/State:	Email:
Bank Name:	Contact Name:
Account Number:	Phone:
City/State:	Email:

We, the undersigned, certify that the information provided here is true and correct. We understand that this information will be held in strict confidence and will be used by Spectrum Industries in establishing a line of credit. The undersigned agrees that the payment terms for purchases on credit shall be Net 30 days from the date of invoice and that invoices unpaid after 30 days will cause future orders to be delayed. If payment is not received when due, applicant agrees to pay a monthly service charge of 1.5%(18% annually) of the unpaid delinquent balance until the account is paid in full. In the event that the account must be placed for collection, applicant agrees to pay all costs and expenses of collection including reasonable attorney fees and expenses.

Company:	Date:
Authorized Signature	
Name:	
Title:	

****We can not process your application without an authorized signature and at least four quality trade references complete with phone and email addresses****

Return To: Spectrum Industries RE: Credit Application Email: info@spectrumfurniture.com Fax: 715-723-9002