



Business Credit Application

Company Legal Name _____

DBA (if applicable) _____

Ship to Address: _____

City, State Zip Code _____

Bill To Address (if different) _____

City, State Zip Code _____

Phone Number _____

Fax Number _____

Federal ID Number _____

Incorporated (circle one) Yes No

Dunn's Number _____

State of Incorporation _____

Owner/President _____

Purchase Order Required

Treasurer/Controller _____

(circle one) Yes No

Purchasing Contact _____

Phone # _____

Accts Pay Contact _____

Phone # _____

Name of Bank _____

Phone # _____

City, State _____

Fax # _____

Checking Acct # _____

Loan Acct # _____

Contact Name _____

Number years at this Bank _____

Credit References:

Company Name _____

Phone # _____

City, State _____

Fax # _____

Contact Name _____

Yrs doing business _____

Company Name _____

Phone # _____

City, State _____

Fax # _____

Contact Name _____

Yrs doing business _____

Company Name _____

Phone # _____

City, State _____

Fax # _____

Contact Name _____

Yrs doing business _____

Company Name _____

Phone # _____

City, State _____

Fax # _____

Contact Name _____

Yrs doing business _____



Business Credit Application

Upon approval of this application, a terms account will be opened for your convenience. All bills are due in our office according to the terms set for your account. A finance charge will be added to all amounts not paid within the agreed terms at the highest rate allowed by state law.

If failure to pay according to the terms of this Agreement causes this account to be assigned or referred to an agency/attorney for collection, Buyer agrees to pay Seller's reasonable costs for collection and/or all court fees/costs.

Seller is authorized to investigate Buyer's credit record. Seller is also authorized to report Buyer's performance on this Agreement to proper persons and credit agencies whenever Buyer gives Seller's name as a credit reference.

To secure full payment of the purchase price of all goods and services. Buyer, as debtor hereby, grants to Seller, as secured party, a purchase money security interest in all goods to be purchased hereunder and shall execute upon request of Seller from time to time, such financing statements or other documents as may be deemed necessary or appropriate by Seller to protect or perfect its security interest hereby created.

The undersigned hereby certifies that he or she is duly authorized to sign this application on behalf of Applicant/Buyer, that the information given in this application is true and correct to the best of his/her knowledge and that the Applicant/Buyer hereby agrees to the foregoing terms and conditions.

Legal name of Company _____

Authorized Name and Title _____
Please Print

Authorized Signature _____ *Date* _____

attention: If your Company is exempt from Sales Tax please provide us with a copy of your State Tax Exemption Certificate. With out this form we will be required to charge Sales Tax on our invoices to your company,

Thank you ARC Indiana

When complete please fax back to: 574 - 289 - 5620 Attention: Credit Department

Sales Rep Name _____
Please Print