## **CREDIT APPLICATION**

Date Taxable Tax	Exempt Tax Exempt Number
Company Name	Website
Billing Address	
CONTACTS (Must be completed to approve credit)	
Purchasing	Email
Phone	Eav
Accounts Payable	Email
Phone	<del>-</del>
TRADE REFERENCES	
Business	
Contact	Email
Phone	Fax
Business	
Contact	
Phone	
Business	
Contact	
Phone	_
That I am authorized, in my capacity, to bi	ed to you on this page is for the purpose of obtaining credit from your firm. nd by our firm accordingly. I agree that all accounts or monies due shall that all past due accounts, notes, or judgments shall automatically draw 3%) per annum.
Name	Title
How did you hear about us?	

Please submit completed form to credit@southernfasteners.com or fax to 336-765-9987