



W.A. Whitney Co. • 650 Race St. • P.O. Box 1206 • Rockford, IL 61105

Tel: 815-964-6771 • Fax: 815-964-3175 • www.wawhitney.com

APPLICATION FOR CREDIT TERMS

Date: _____

BUSINESS INFORMATION:

LEGAL BUSINESS NAME: _____

Billing Address: _____ City, State, Zip: _____

Shipping Address: _____ City, State, Zip: _____

Phone: _____ Fax: _____

Contact: _____ Title: _____

Type of Business: Corporation Partnership Sole Proprietorship L.L.C. L.L.P.

Status of Business: New Established Years in Business: _____

Owner/Principal Name: _____ Social Security Number: _____

Street (home address): _____ City, State, Zip: _____

Do any unsatisfied judgments exist? Yes No If yes, please explain at the bottom of page 2.

Have you ever filed Bankruptcy? Yes No If yes, please explain at the bottom of page 2.

Federal Tax ID Number or Social Security Number: _____

Tax Exemption Number : _____ Resellers Number: _____

BANK AND TRADE RELATIONSHIPS:

Primary Bank: _____ Branch: _____ Account #: _____

Bank Officer: _____ Phone #: _____

Operating Line of Credit Current Balance: _____ Maximum Available: _____

Other Bank/s: _____ Account #: _____

Bank Officer: _____ Phone #: _____

Operating Line of Credit Current Balance: _____ Maximum Available: _____

TRADE REFERENCES:

MACHINERY SUPPLIERS/BUILDERS:

Name: _____ Address: _____

Contact: _____ Phone: _____ Fax: _____

Name: _____ Address: _____

Contact: _____ Phone: _____ Fax: _____

Name: _____ Address: _____

Contact: _____ Phone: _____ Fax: _____



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OTHER SUPPLIERS:

Name: _____ Address: _____

Contact: _____ Phone: _____ Fax: _____

Name: _____ Address: _____

Contact: _____ Phone: _____ Fax: _____

Name: _____ Address: _____

Contact: _____ Phone: _____ Fax: _____

In consideration for credit being extended, I/We acknowledge and agree to the following (1) payment is jointly, severally, and unconditionally guaranteed according to invoice terms, (2) any charges unpaid after terms are to be increased by 2% per month, (3) any charges still outstanding after terms are subject to collection, and all collection or arbitration expenses, attorney’s fees, and court costs will be borne by the purchaser, (4) a UCC-1 blanket security filing will be made covering all purchases from W.A. Whitney Company.

I/We authorize the above bank and business references to give any and all necessary information to you, your assignees or transferees, which will assist you in your credit inquiry. This application is given for the purpose of obtaining credit. I/We hereby certify under penalty of law that the foregoing information is true and complete. In the event of any material changes in my/our financial condition, I/we will notify you immediately in writing. I/We understand that this information is intended for the use of your credit department only and will be held in the strictest confidence.

CREDIT CANNOT BE EXTENDED UNTIL THIS FORM IS COMPLETED AND VERIFIED.

ADDITIONAL COMMENTS / EXPLANATIONS: _____

_____.

Authorized Signature: _____ **Title:** _____

**PLEASE RETURN THIS COMPLETED APPLICATION TO:
KRISTY D. STRAWN, CREDIT MANAGER
PHONE: 800-201-2516
FAX: 877-209-1040
E-MAIL: KDSTRAWN@MEGAMFG.COM**