



www.2Linc.com

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CREDIT APPLICATION

CONFIDENTIAL

Please Complete All Areas And Sign Below.

Return to: Fax (978)562-8972 or Email contact@2Linc.com

Applicant Company Information			
Firm Name:		Federal Tax ID Number:	
Invoice Address:		Ship To Address:	
Telephone:	Fax:	Email:	
Type of Business:		In Business Since:	
Purchasing Contact		Accounts Payable Contact	
Name:		Name:	
Telephone & Ext.:		Telephone & Ext.:	
Email:		Email:	
Bank Information			
Bank Name:		Telephone:	
Address:			
Account Number:		Account Type:	
Trade References			
Company Name:		Account Number:	Address:
Contact:	Telephone:	Fax:	Email:
Company Name:		Account Number:	Address:
Contact:	Telephone:	Fax:	Email:
Company Name:		Account Number:	Address:
Contact:	Telephone:	Fax:	Email:

If this application is approved and credit is extended, the applicant shall be deemed to have agreed to the following terms and conditions. If accounts are not properly paid when due, the applicant's name may be listed in any Collection or Credit Rating file and if this account is collected by a collection agency or an attorney, by suit or otherwise, applicant agrees to pay all collection fees and/or attorney fee and cost of collection. Terms if not otherwise specified are net 30 days. Interest shall also be added to any unpaid to any unpaid balance at the rate of 1½% per month, which is equivalent to 18% per annum, unless such interest is prohibited by any existing local laws and then the maximum allowed under such local status shall be in effect.

All Payments are required in US Dollars.

Authorized Signature:	Title:	Date:
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