



Framing Systems, LLC

5602 County Road 41
Farmington New York 14425
Phone: (585) 924-4690
Fax: (585) 924-4821

APPLICATION FOR CREDIT

PLEASE RETURN APPLICATION TO: gbourgoine@minitecframing.com

DATE	SALES REPRESENTATIVE	AMOUNT REQUESTED

For the purpose of establishing credit with creditor I/we, the undersigned, warrant the financial information below to be true, correct and complete to the best of my knowledge and hereby authorize any credit investigation needed for verification

LEGAL NAME OF BUSINESS	FEDERAL TAX ID#	DUNS#
PHYSICAL LOCATION ADDRESS	ACCOUNTS PAYABLE ADDRESS (IF DIFFERENT)	
CITY, STATE	ZIP	CITY, STATE ZIP
BUSINESS TELEPHONE	NAME OF ACCOUNTS PAYABLE CONTACT	
BUSINESS FACSIMILE	ACCOUNTS PAYABLE TELEPHONE	
EMAIL ADDRESS FOR INVOICE SUBMISSION:	ACCOUNTS PAYABLE EMAIL ADDRESS:	

PRINCIPAL OR OWNER'S PERSONAL INFORMATION REQUIRED FOR SOLE PROPRIETORS OR DBA'S ONLY

NAME	HOME TELEPHONE
HOME ADDRESS	

Please complete the bank and trade sections below or attach your standard company trade and bank reference form.

BANK NAME AND BRANCH	Type of Account: CKG ___ SVG ___
CONTACT NAME & PHONE	ACCOUNT NUMBER

TRADE REFERENCES

Full Name	Address	Telephone #	Fax # or Email
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

In consideration of credit being granted to me or to my agent(s), I agree to the following terms.

- To pay invoices in full within the terms stated on the invoice.
- In the event of default of foregoing paragraph one I agree to pay a service charge of 1.5% per month added on all unpaid balances past due. This service charge rate equals 18% per annum.
- If legal action is required in the collection of this account, I agree to pay all reasonable charges including attorney's fee and further agree that a charge of 33% of the amount of the claim shall be considered reasonable as a fee.
- MiniTec Framing Systems, LLC reserves the right to pursue any and all legal action in its local jurisdiction.

Signature of Owner or Principal/Title

Date