



Customer Application for NET30 Credit Terms

DATE \_\_\_/\_\_\_/\_\_\_

ePlastics www.ePlastics.com
5535 Ruffin Road • San Diego, CA 92123 • 858-560-1551 • fax 858-560-1941

San Diego's Award Winning Plastic Company

Order in Process? Y / N

Salesperson: \_\_\_\_\_

BUSINESS INFORMATION - please fill out completely

Form with fields: Name, Legal Name, Billing Address, City, State, Zip, Phone, Ship to: Address, City, State, Zip, Phone

DESCRIPTION OF BUSINESS - please fill out completely

Form with fields: # Employees, \$\$Credit Required, In Business since, Name of Parent Company, Corporation Y / N, Partnership Y / N, Sole Proprietor Y / N, Resale Number, FAX Number, Federal Tax ID #, Dun & Bradstreet Number/Rating

Do you require PO's on all of your orders? Y / N

Persons authorized to place orders: \_\_\_\_\_

Accts Payable Contact: \_\_\_\_\_ phone: \_\_\_\_\_ fax: \_\_\_\_\_ email: \_\_\_\_\_

Principal: \_\_\_\_\_
(Name) (Title) (Soc.Sec#) email

Principal: \_\_\_\_\_
(Name) (Title) (Soc.Sec#) email

BANK REFERENCES

Form with fields: Name of Bank, Branch, Address, Checking Acct#, Contact, Phone #, Fax #

TRADE REFERENCES

Table with 2 columns: Firm Name, Fax Number / Email

CONFIRMATION OF ACCURACY • RELEASE OF AUTHORITY TO VERIFY • AGREEMENT OF TERMS

I hereby certify that the information in this credit application is correct. The information in this credit application is for use by ePlastics in determining the amount and conditions of credit to be extended. I understand that ePlastics may also utilize the other sources of credit information which it considers necessary in making this determination. Further, I hereby authorize the bank and trade references listed in this application to release the information necessary to assist ePlastics in establishing a line of credit. It is hereby understood that the undersigned agrees to pay a late charge of 1.5% per month (18% annual) on any past due balances, as well as collection/attorney charges if the account is so referred. The Terms are Net 30 days on Approved Credit. The undersigned understands that invoices unpaid 40 days after invoice date will put the account on a COD status, over 60 days in a Permanent COD status.

X
SIGNATURE and PRINT NAME TITLE DATE

Please be prepared to pay for an order in process at time of shipment.
Credit Approval is based on timely trade reference responses and Experian credit report.
Please allow 15 business days for final approval after receipt of this form in our accounting department. Thank you.