

CREDIT APPLICATION

Please complete this form along with the attached tax certificate and return

Fax: 810-744-3505 or Email: AR@midstatesbolt.com

Legal Business Name:			
DBA (if applicable):			Year established:
Business Addresses:	Bill to address:		Ship to address:
	Street: _____		Street: _____
	City: _____		City: _____
	State: _____ Zip: _____		State: _____ Zip: _____
Company Phone & Fax:	Phone: _____	Fax: _____	
Accounts Payable, Billing Preferences and Executive contacts:	AP: _____	Owner / Officer: _____	
	Phone: _____ Send Invoices	Email: _____	
	Fax: _____ <input type="checkbox"/> Fax	Controller / CFO: _____	
	Email: _____ <input type="checkbox"/> Email	Email: _____	
Trade name:			Contact:
Street:			Phone:
City:	State:	Zip:	Fax:
Trade name:			Contact:
Street:			Phone:
City:	State:	Zip:	Fax:
Trade name:			Contact:
Street:			Phone:
City:	State:	Zip:	Fax:
Bank name:			Contact:
Street:			Phone:
City:	State:	Zip:	Fax:

Company Authorization: To our trade and bank references: Please be advised that we have given your name as a reference for our company. We ask that you use this authorization to release the above requested information to Mid-States Bolt & Screw Co.

SIGNED: _____ TITLE: _____ DATE: _____
Application must be signed by authorized personnel only.

Signatures are required to proceed with the submission of credit application. All parties agree that signatures on this agreement may be delivered by fax or email in lieu of an original signature and agree to treat faxed or emailed signatures as original signatures which are legally binding. Should Mid-States Bolt & Screw Co. extend credit to the applicant, the applicant hereby acknowledges, assumes and approves of our terms and conditions. In the event of nonpayment reasonable fees will be assessed including but not limited to collection fees, attorney expenses and other associated fees. Invoices 30 days beyond terms may be subject to interest charges of 2.00% per month. All discrepancies must be reported within 10 days. No items may be returned or altered without express permission from Mid-States Bolt & Screw Co. Both parties irrevocably submit to the jurisdiction of any Michigan or federal court in Michigan in any action arising out of this agreement.



Dear Customer,

Thank you for choosing Mid-States Bolt & Screw Co. "THE DEDICATED FASTENER PEOPLE", to supply you with your various industrial fasteners and hardware needs. We look forward to serving your business with our high standards of customer service that has made us successful over the last 40+ years. To ensure timely processing of your credit application, please note the following requests:

- ✓ The **credit application** and the **sales and use tax certificate** MUST BE COMPLETED IN FULL with special emphasis on:
 - Full business name and/or "doing business as" name
 - Business phone & fax numbers
 - **Reference Phone & Fax numbers**
 - Reference contact name
- ✓ A SIGNATURE IS REQUIRED on the credit application, even when attaching a separate reference page. Expect delays in processing if the application is not properly signed. Please note that **ONLY** authorized company personnel should sign the credit application.
- ✓ We request a tax form for **both taxable and exempt customers** for our records. Please complete our form appropriately.

If all of the above requested information has been provided at the time your application is received, we will begin processing without delay, however please allow a minimum of 3 to 5 business days in advance of orders. Upon credit approval you will receive a welcome letter via post providing you with important account details and procedures.

If you have any questions regarding the attached documents or the status of your application, please feel free to contact our Corporate Office at 800-482-0867.

Sincerely,

Accounts Receivable Department

mid-states bolt & screw co.

Phone: 810-744-0123 Fax: 810-744-3505

Email: AR@midstatesbolt.com

