



Singer Equipment Company
150 South Twin Valley Road
Elverson, PA 19520

Email: ARKittredge@singerequipment.com

CREDIT APPLICATION

* Fields in red are required.

Legal Name:			Trade Name:		
Billing Address:			Ship To Address:		
City:	State:	Zip Code:	City:	State:	Zip Code:
Phone:		Fax:		Cell:	
Contact Person:		Email Address:			
Type of Business: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC EIN: _____ State and address of registration: _____					
Nature of Business:			Date Established:		
OWNER(S) - OFFICER(S)					
Name / Title:		Name / Title:		Name / Title:	
Phone:		Phone:		Phone:	
Home Address:		Home Address:		Home Address:	
City:	State:	Zip:	City:	State:	Zip:
BANK REFERENCES					
Bank Name:		Type of Account:		Account Number:	
Address:					
Does Business Lease or Own Building? <input type="checkbox"/> Lease <input type="checkbox"/> Own		Other Business Owned:		Name and Address of Landlord/Mortgage Holder:	
Names of Authorized Purchasers: 1. _____ 2. _____ 3. _____					
IT IS UNDERSTOOD THAT ALL PURCHASES ARE DUE AND PAYABLE ON THE THIRTIETH (30) DAY AFTER DELIVERY AND A LATE CHARGE OF 1.5% PER MONTH WILL BE CHARGED TO ALL BALANCES OPEN BEYOND SAID DATE. (ANNUAL PERCENTAGE RATE: 18%.)					
I REPRESENT, KNOWING THAT YOU WILL RELY UPON SAME, THAT I AM AUTHORIZED TO EXECUTE THIS CREDIT APPLICATION AND SUBMIT SAME ON BEHALF OF THE NAMED ENTITY. THAT I SUBMIT THE ABOVE INFORMATION FOR THE PURPOSES OF OBTAINING CREDIT APPROVAL. THAT I UNDERSTAND AND AGREE TO THE TERMS DELINEATED HEREIN AND HEREBY AUTHORIZE YOU TO OBTAIN ANY INFORMATION YOU MAY REQUIRE FOR PURPOSES OF THIS CREDIT APPLICATION FROM ANY LENDER OR CREDIT BUREAU.					
Print Name:			Title:		
Signature:			Date:		

Delivery Windows - ***MUST BE FILLED IN***
Start Time:
End Time:
Restricted Times:

Estimated Annual Purchases: _____

SINGER EQUIPMENT COMPANY AND AFFILIATED COMPANIES LISTED HERE AND AFTER FOR THE PURPOSES OF THE CREDIT APPLICATION ARE REFERRED TO AS SINGER EQUIPMENT COMPANY.

AUTHORIZATION TO RELEASE ACCOUNT INFORMATION

In recent months, more and more banks have been requesting written authorization from their clients before releasing financial information to suppliers. Please complete and sign the following so that this can be forwarded to your bank along with your request for credit information.

TO: (Name and Address of bank)

Let this serve as written authorization for the above name financial institution to release credit information to Singer Equipment Company, Inc so that open account credit may be established with them.

COMPANY NAME: (Name of business establishing credit)

SIGNATURE:

 **Be sure to sign**

TITLE:

DATE:

CHECKING ACCOUNT #:

LOAN ACCOUNT #:



AUTHORIZATION TO PURCHASE

TO:
Singer Equipment Company, Inc.

FROM:
Customer:

Please be advised that only those individuals listed below are authorized to purchase and pickup equipment and/or supplies for the above mentioned account.

AUTHORIZED PURCHASERS:

_____	Title: _____
_____	Title: _____
_____	Title: _____

It is the customer's responsibility to advise Singer Equipment Company IN WRITING of any modifications, additions or deletions to the above listed account.

Customer agrees to assume full responsibility for payment to Singer for all purchases made under the provisions of the agreement and any liabilities that arise in the ordinary course of Singer's business after the signing of this agreement.

Intending to be legally bound, I have read this agreement and fully understand its significance. I hereby execute this authorization representing my acknowledgement.

Signature:	Name (print):
Title:	Date:

CREDIT REFERENCES

Please list vendors in which you have done business with in the past year.

TRADE REFERENCES:

1. Company Name:
Phone:
Fax:
Account Number:
-

2. Company Name:
Phone:
Fax:
Account Number:
-

3. Company Name:
Phone:
Fax:
Account Number:
-

4. Company Name:
Phone:
Fax:
Account Number:
-

5. Company Name:
Phone:
Fax:
Account Number:

****Copy of SALES TAX EXEMPTION CERTIFICATE is required if applicable****