

## Compositech Products Manufacturing, Inc. Application for Credit

Name of Company Applying for Credit _____	Establish Date _____
Mailing Address _____	Area Code _____ Phone _____
City _____	Area Code _____ Fax _____
Federal Tax ID No. _____	E-mail address _____

Hereby applies for credit in accordance with the terms and conditions of:  
**Compositech Products Mfg, Inc.** Main Phone (281) 648-3557  
 PO Box 2673 Main Fax (281) 648-4515  
 Pearland, Tx 77588

**Our Credit Terms**  
 Net 30 days  
 1% Net 10  
 C.O.D. (Cash/Ck/CC/WT)

The following information must be provided to process credit application.

**Ownership:** Corporation  Check here if incorporated with the past 12 months Partnership  Individual

1. Name(s) of Principal(s) \_\_\_\_\_ Complete Address \_\_\_\_\_ Zip \_\_\_\_\_ Area Code \_\_\_\_\_ Phone \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Finance:**

Bank _____	Bank Address _____
Bank Officer or Department _____	Area Code _____ Phone _____

A/P Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Purchase Order Required (please check one):  yes  no  
 Purchasing Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Trade References:** All reference information must be obtained and verified in order to complete the credit approval process.

1. Business Name \_\_\_\_\_ Area Code \_\_\_\_\_ Phone \_\_\_\_\_  
 Business Address \_\_\_\_\_ Zip \_\_\_\_\_ Area Code \_\_\_\_\_ Fax \_\_\_\_\_
2. Business Name \_\_\_\_\_ Area Code \_\_\_\_\_ Phone \_\_\_\_\_  
 Business Address \_\_\_\_\_ Zip \_\_\_\_\_ Area Code \_\_\_\_\_ Fax \_\_\_\_\_
3. Business Name \_\_\_\_\_ Area Code \_\_\_\_\_ Phone \_\_\_\_\_  
 Business Address \_\_\_\_\_ Area Code \_\_\_\_\_ Fax \_\_\_\_\_

We, the company or individual stated above, certify that all the information given is correct. We also fully understand the credit terms and agree to the full payment for services offered by Compositech Products Mfg, Inc.

\_\_\_\_\_  
 (Signed/Title) \_\_\_\_\_  
Date

<b>For Office Use Only:</b> <input type="checkbox"/> Credit Approved <input type="checkbox"/> Credit Denied		<b>Approved By</b> _____	
Customer Account _____	Date <u>   </u> / <u>   </u> / <u>   </u>	First Order: \$ _____	# _____
Sales Person _____	Credit Limit \$ _____	Amount of Order _____	Check/Wire Reference _____