



HI-TECH FASTENERS

CREDIT APPLICATION FOR A BUSINESS ACCOUNT - US

Please return this completed and signed Credit Application to A/R

Email: AR@htfinc.com

Phone: (301) 831-1277 Fax: (301) 358-6493

BUSINESS CONTACT INFORMATION											
Company Contact Name (Primary Contact):											
Company Name:											
Phone:			Fax:			E-mail:					
Bill To Address:											
City:			State:			Zip:					
Date Business Commenced:					Anticipated Annual Sales Dollars:						
Ship-To Address:								How long at Current Address:			
DUNS #:		Sales Tax Status:		Taxable		OR		Nontaxable		Attach certificate if exempt	
Sole Proprietorship:		Partnership:		Corporation:		Other:					
A/P Contact Name:						Phone:					
Invoice / Statement Delivery:		Email		Fax		Mail		Email:			
Purchasing Contact Name:						Phone:					
						Email:					
BUSINESS AND CREDIT INFORMATION											
Bank Name:											
Bank Address:								Phone:			
City:			State:			Zip:					
Account #:											
BUSINESS / TRADE REFERENCES											
Name:											
Address:											
City:			State:			Zip:					
Phone:			Fax:			Email:					
Name:											
Address:											
City:			State:			Zip:					
Phone:			Fax:			Email:					
Name:											
Address:											
City:			State:			Zip:					
Phone:			Fax:			Email:					
AGREEMENT											
All invoices are to be paid 30 days from the date of the invoice. Claims arising from invoices must be made within seven working days from date of delivery of product. By submitting this application, you authorize Hi-Tech Fasteners, Inc. to make inquiries into the banking and business/trade references that you have supplied. Your signature below certifies that the above information is current and accurate. You agree to pay all invoices within terms. In the event the invoices are not paid within terms, you agree to pay: Interest at a rate of 1-1/2% per month (18% Per Year) and any costs incurred by Hi-Tech Fasteners, Inc. in collection of monies due, including collection fees, attorney fees, court costs, etc.											
SIGNATURE											

Signature: _____
Printed Name: _____

Date: _____
Title: _____