



Battery Watering Technologies

# CUSTOMER CREDIT APPLICATION

## BUSINESS CONTACT INFORMATION

Company Name

Federal Tax ID#

Resale Certificate #

\*If no Fed Tax ID#, we must have the Owner's Name, address, and Social Security Number

Billing Address

City

State

Zip

Phone

Fax

Email

Ship to Address

City

State

Zip

Anticipated High Credit \$

AP Manager Name

AP Manager Email

AP Phone

AP Fax

Order Confirmations &amp; Invoices should be sent to

Fax or Email for Confirmations/Invoices

Officer's Name / Title

Signature

Date

## BANK REFERENCE

Institution

Location

Contact

Phone

## TRADE REFERENCES

Reference #1

Address

City

State

Zip

Phone

Fax

Reference #2

Address

City

State

Zip

Phone

Fax

Reference #3

Address

City

State

Zip

Phone

Fax

## AGREEMENT

If credit is granted, (I) (We) promise to pay bills when rendered. (I) (We) understand all invoices are payable 30 days from date of invoice. In the event payment is not made and (my) (our) account is referred to a collection agency, (I) (We) will pay all costs of collection. If legal action is required, (I) (We) will pay reasonable attorney's fees resulting from such action. (I) (We) authorize the above listed bank and trade references to release to Battery Watering Technologies any credit or financial information that Battery Watering Technologies may request and further agree is B.W.T. grants credit, to comply with above terms of credit.

Name and Title

Signature

Date