



A & S Fabricating Co.

"No Job Too Small"

"Custom Metal Fabrications"
"Machine Shop Service"

P.O. BOX 160
265 US 431 NORTH
LIVERMORE, KY 42352
PHONE 270-278-2371
FAX 270-278-2374
Email: Creditdept@asfabco.com

=BUSINESS CREDIT APPLICATION=

DATE: _____

=BUSINESS INFORMATION-MUST BE COMPLETED=

Bill To:
BUSINESS NAME: _____ DBA _____
STREET ADDRESS: _____ P.O. BOX _____
CITY: _____ STATE: _____ ZIP _____
PHONE: _____ FAX: _____ EMAIL: _____

Ship To:
COMPANY NAME: _____
STREET ADDRESS: _____
CITY: _____ STATE _____ ZIP _____
PHONE: _____ FAX: _____ EMAIL: _____

TYPE OF BUSINESS: Corporation Partnership Proprietorship Individual Other _____
(Please circle)

DESCRIPTION OF BUSINESS: OEM Resale End User HOW LONG IN BUSINESS _____ Years

FEDERAL ID# _____ DUNS#(For This Bill To:) _____

DO YOU REQUIRE PURCHASE ORDER NUMBERS? _____ AMOUNT OF CREDIT NEEDED? _____

ARE YOU TAX EXEMPT? _____ (Kentucky Tax will be charged unless we receive a copy of your resale or tax exemption certificate.)

=BANK REFERENCE=

BANK NAME _____
BANK CONTACT _____
PHONE # _____ FAX# _____ EMAIL ADDRESS _____

= 3 CREDIT REFERENCES REQUIRED=

COMPANY NAME _____
ADDRESS _____
CONTACT _____ DEPT _____
PHONE _____ FAX _____ EMAIL _____

COMPANY NAME _____
ADDRESS _____
CONTACT _____ DEPT _____
PHONE _____ FAX _____ EMAIL _____

COMPANY NAME _____
ADDRESS _____
CONTACT _____ DEPT _____
PHONE _____ FAX _____ EMAIL _____

TERMS AND CONDITIONS

Applicant's signature attests financial responsibility of applicant's company, in addition to company's ability and willingness to pay for material supplied according to our credit terms, which are NET 30 days. A & S Fabricating Co. (herein referred to as A & S) reserves the right to charge interest for invoices not paid according to these terms at the rate of 1 1/2% per month on the unpaid balance. A & S also reserves the right to limit or terminate credit if account is not paid according to these terms and conditions.

GENERAL PROVISIONS

This application and the information contained herein is a request for the extension of credit for commercial business use only. The applicant authorizes A & S to obtain a written or oral credit report from any credit reporting agency. Applicant further authorizes any bank or commercial business with whom the applicant is doing or has done any type of business to give any and all necessary information to A & S which will assist A & S in it's credit investigation. The applicant further authorizes A & S to investigate the applicant credit status from time to time as A & S deems necessary. Any changes in legal status must be communicated to A & S by certified mail. The original applicant will remain liable until such time as A & S has received notice of the change in legal status and been given a reasonable period of time to respond to such notice. Further, should this account be placed for collection the applicant agrees to pay all costs of collection including, but no limited to attorney fees of 25%.

APPLICANT'S SIGNATURE _____ TITLE _____
PRINTED NAME _____

**** PLEASE EMAIL CREDIT APPLICATION TO: Creditdept@asfabco.com or FAX TO 270-278-2374****

For A & S Office Use:
SALESPERSON/ESTIMATOR _____ CREDIT DEPT _____ CREDIT LIMIT _____ DATE _____