



### Application for Credit

Company Name: \_\_\_\_\_ DBA: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

DUNS #: \_\_\_\_\_

No. of Years in Business: \_\_\_\_\_ What amount of credit line are you applying for: \$ \_\_\_\_\_

Estimated Sales Volume: \$ \_\_\_\_\_ Estimated Wholesale Purchases: \$ \_\_\_\_\_

President/Owner's Name: \_\_\_\_\_

Tel #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax #: \_\_\_\_\_

Buyer's Name: \_\_\_\_\_

Tel #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax #: \_\_\_\_\_

A/P Contact's Name: \_\_\_\_\_

Tel #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE CHECK ONE: Corporation  Limited Liability  Partnership  Proprietorship

Federal Tax ID Number: \_\_\_\_\_

BANK REFERENCES: Bank Name: \_\_\_\_\_

Tel. #: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Bank Address: \_\_\_\_\_ Bank Rep. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Bank Acct #: \_\_\_\_\_

**TRADE REFERENCES: (Please include references within the steel industry)**

Name: \_\_\_\_\_ Tel #: \_\_\_\_\_

Address: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Tel #: \_\_\_\_\_

Address: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Tel #: \_\_\_\_\_

Address: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Tel #: \_\_\_\_\_

Address: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

I (We) certify that the above information is true and correct, and I (We) agree that all past due invoices will be subject to a finance charge of 1 ½% per month. Should it become necessary to place the account with an attorney for collection, the Applicant agrees to pay all costs including court costs and attorney's fees. There will be a \$35.00 fee assessed for any payment returned for non-sufficient funds.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
(Officer or Owner)

**Mill Steel Company Standard Terms 1/2% 10, NET 30**

**RELEASE OF INFORMATION**

It is agreed that Mill Steel Company is given authorization to obtain information from Bank, Trade and Financing references in connection with this credit inquiry.

Account Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

X

Signature of Officer, Partner or Owner

**\*PLEASE RETURN THIS FORM, A SALES TAX EXEMPTION CERTIFICATE, AND A COPY OF YOUR MOST RECENT FINANCIAL STATEMENTS TO: [AR@MILLSTEEL.COM](mailto:AR@MILLSTEEL.COM)**