



PACIFIC ARTS AND CRAFTS
 30211 106TH AVENUE EAST
 GRAHAM, WA 98338
 TEL: 253-847-7058 FAX: 253-847-3047

CREDIT APPLICATION FOR NET 30 TERMS

Business Name: _____ Phone: (_____) _____
 Address: _____ Fax: (_____) _____
 City/State/Zip: _____ Email: _____
 D&B # _____ Federal ID # _____
 Company is: Corporation Sole Proprietorship Partnership
 Other _____ Time in Business: _____
 Contact Person: _____ Credit Amount Requested \$ _____
 Nature of Business: _____

OWNERSHIP

Name (President)	Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

FINANCE

Bank Name	Contact Person
_____	_____
_____	_____
_____	_____

I _____ of _____ hereby authorize Pacific Arts and Crafts, LLC to verify any credit information provided by this source document. I further authorize our banks, trade references and financial institutions the right to release by telephone or fax all credit information requested by Pacific Arts and Crafts, LLC. We understand that ANY information obtained by Pacific Arts and Crafts, LLC will be held in confidence. The requested information will be used solely in assisting and securing credit terms for the applicant.

REFERENCES (Trade Accounts ONLY)

_____	_____	_____	_____
Company	Contact Person	Phone	Fax
_____	_____	_____	_____
Company	Contact Person	Phone	Fax
_____	_____	_____	_____
Company	Contact Person	Phone	Fax

Credit privileges are hereby provided for and it is understood and agreed that upon approval, the terms of payment are Net 30 days from the date of invoice. Accounts past due are subject to a 1.5% Service Charge per month. If payment is not received within 30 days, the account will be SUSPENDED and NO CHARGES will be accepted until the account is paid in full. Buyer will also be responsible for all incurred expenses should the account be turned over to a collection agency.

BY MY SIGNATURE BELOW, I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND AGREE TO THE TERMS AS OUTLINED ABOVE.

Name _____ Title _____ Date _____
 please print

Authorized Signature _____