

# KOOLPAK LLC

TRANSPORTATION • WAREHOUSING • DISTRIBUTION

## APPLICATION FOR CREDIT

Company Name:		Date:	
		Phone:	
Street Address:		Fax:	
City:	State:	Zip:	
Billing Address:		Phone/Fax:	
City:	State:	Zip:	
Accounts Payable Contact:		Accts Pay Contact Email:	
Accounts Payable Contact Phone:		Accounts Payable Contact Fax:	
Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other:		State:	Year:
Type of Business:		How long in business?	
President/Owner:	Phone:	SS#:	
Vice President/Owner:	Phone:		
Controller:	Phone:		
Have any of the above principals ever had a business failure or filed bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Federal ID Number:		DUNS Number:	
Monthly Requirements in \$:		<i>(If more than \$15,000, please attach Financial Statements for last 2 Years.)</i>	

## CREDIT REFERENCES

A minimum of 3 trade references is required. Please attach a separate prepared company reference sheet with names, addresses and phone numbers.

Bank:	Branch:
Office or Contact:	Phone:
Account Number(s):	

## TERMS AND CONDITIONS

The above information is given for the purpose of obtaining open account credit with Kool Pak LLC and is warranted to be true. We agree to pay all invoices in accordance with your regular terms of NET 10 DAYS from date of shipment. Should suit of collection action be instituted in collection of our debt, we hereby agree to pay all reasonable collection costs, expense, attorney's fees, and court costs incurred in the enforcement of the obligations of the undersigned. A service charge of 1½% per month may be added to all delinquent invoices. All legal actions shall be brought in Multnomah County, Oregon and all legal proceedings shall be governed by the laws of the State of Oregon. We hereby authorize our credit references to release any information necessary to assist in establishing a line of credit with Kool Pak LLC. Customers requiring a credit limit in excess of \$15,000 may be asked to consent to the filing of a security interest.

Firm Name:	Date:
By:	Title:

Note: After a review by our Credit Department, a personal guarantee may be required.

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