



Garland Welding Supply

Credit Application (Page 1)

Please print both pages of form, fill in all areas, and fax to our office (972.276.2025).

Company Name									
Phone		Fax							
Billing Address									
City		State		Zip					
Shipping Address									
City		State		Zip					
Phone		Fax							
Email									
Proprietor		Partnership		Corporation		Specify State		Year Established	
Name of Parent (if this is a subsidiary)									
Names of Partners of Corporation, Officers, and Duties									
Type of Business									

REFERENCES

Bank			
Name			
Address			
City		State	
Phone		Zip Code	
Person to Contact			
Number of Years Doing Business			



Garland Welding Supply

Credit Application (Page 2)

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TRADE REFERENCE #1			
Name			
Address			
City		State	
Phone		Zip Code	
Fax			
TRADE REFERENCE #2			
Name			
Address			
City		State	
Phone		Zip Code	
Fax			
TRADE REFERENCE #3			
Name			
Address			
City		State	
Phone		Zip Code	
Fax			

NOTE: FINANCIAL STATEMENT MAY BE REQUIRED TO OPEN ACCOUNT.

Accounts not paid within 30 days shall be subject to a service charge calculated at the lower of 1 1/2% per month or the highest rate allowed by law on any amount, which becomes past due or delinquent. Buyer is responsible to pay any and all attorney fees, collection fees, or court costs involved in the collection of any and all outstanding purchases.

THE SIGNER CERTIFIES THE ABOVE INFORMATION HAS BEEN CAREFULLY READ AND IS TRUE AND CORRECT.

Authorized Signature		Print Name	
Title		Date	

TAX: All sales are considered taxable unless certificate of exemption is completed and signed.