



ACCT \_\_\_\_\_

# APPLICATION FOR CREDIT

**ALL FIELDS BELOW MARKED WITH A STAR (\*) ARE REQUIRED FOR A COMPLETE CREDIT APPLICATION. FAILURE TO INCLUDE ALL NECESSARY INFORMATION MAY REQUIRE US TO RETURN THIS APPLICATION TO YOU AND POSSIBLY DELAY ANY PENDING ORDERS UNTIL THE APPLICATION IS RETURNED.**

**BILLING ADDRESS****SHIPPING ADDRESS, IF DIFFERENT**

NAME*			NAME*		
STREET ADDRESS*			STREET ADDRESS*		
CITY*	STATE*	ZIP CODE*	CITY*	STATE*	ZIP CODE*

PHONE\* \_\_\_\_\_ FAX\* \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

 INDIVIDUAL  
 PARTNERSHIP  
 CORPORATION  
 FEDERAL I.D. NO.\* \_\_\_\_\_

Please provide a brief description of your business: (ex. new car dealer, auto parts, equipment rental, etc.)\*

NAME OF OWNER(s):\* \_\_\_\_\_

Years established under present ownership:\* \_\_\_\_\_

Desired credit limit: \$ 

**TRADE REFERENCE\***

Name\* \_\_\_\_\_

Phone\* \_\_\_\_\_

Fax Number\* (Required for verification) \_\_\_\_\_

**TRADE REFERENCE\***

Name\* \_\_\_\_\_

Phone\* \_\_\_\_\_

Fax Number\* (Required for verification) \_\_\_\_\_

**TRADE REFERENCE\***

Name\* \_\_\_\_\_

Phone\* \_\_\_\_\_

Fax Number\* (Required for verification) \_\_\_\_\_

**BANK REFERENCE\***

Name\* \_\_\_\_\_

Phone\* \_\_\_\_\_ Fax\* \_\_\_\_\_

Account Number\* \_\_\_\_\_

**Payment Terms:** Payment in full is due by the end of the month following purchase. A 1% discount is allowed if payment is made by the 10th of the month following purchase. (Does not apply if purchase is paid for by credit card.) A service charge of 1.5% (18% A.P.R.) will be charged on all past-due balances (minimum of \$0.75 per past-due month). Accounts with balances past due will be shipped C.O.D. or credit card only.

I / We hereby agree to the above payment terms, and authorize Rigid Hitch, Inc. to verify information about me / us, including requesting reports from credit reporting agencies. If in default, I / We agree to accept late charges of 18% per annum to the unpaid balance and collection costs and attorney fees that may be incurred in recovering the account balance. I / We agree to contact Rigid Hitch, Inc. in writing should there be any change in the ownership or management of this business that may affect this account.

**\* SIGNATURE REQUIRED FOR CREDIT APPROVAL \***

Authorized Signature <b>X</b>	Title	Date
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