



Office Use Only
Account # _____
Terms _____
Group _____

CUSTOMER CREDIT APPLICATION AND PERMANENT FILE UPDATE

Return **completed**, signed form to Credit Department (accounting@powellcompany.com) or FAX 516-699-1001

Customer Name _____
DBA (if applicable) _____
Billing Address _____
Shipping Address _____
(if different) _____
Phone _____ Fax _____
Tax ID# _____ CA Resale #¹ _____
DUNS # _____

Company Officers (Name & Title) _____

Purchasing Contact & Email _____

☐ Interested in online ordering?

Payables Contact & Email _____

Terms Requested ☐ Net 10 ☐ CIA
Pay by Credit Card?² ☐ First order only ☐ All Orders

BANK REFERENCE:

Bank Name _____
Bank Contact _____
Account Number(s) _____
Bank Phone/Fax _____

SUPPLIER REFERENCES³:

Name & Account # _____
Contact & Email _____
Phone/Fax _____

Name & Account # _____
Contact & Email _____
Phone/Fax _____

Name & Account # _____
Contact & Email _____
Phone/Fax _____

SHIPPING METHOD (REQUIRED - choose one):

☐ Will Call (customer will send in their company vehicle & coordinate pickup directly with Powell warehouse)
☐ Freight Collect – carrier name and phone # **required**: _____

Special Instructions _____

Authorized Signature

Printed Name & Title

Date

By signing this application, you hereby authorize the L. Powell Acquisition Corp to contact your bank for a reference.

¹ A valid California resale number is required of all dealers located in, or shipping into California. Failure to provide will result in held orders.

² A 3% transaction fee applies to all charges. A separate Credit Card Authorization form will be sent to you if you choose this option.

³ Please provide an email AND fax number for all trade references. Failure to provide valid contact information will result in delays of processing your credit application.



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I represent that the information provided is true and given to L. Powell Acquisition Corp in an attempt to extend credit to the applicant. My company and I authorize L. Powell Acquisition Corp to make such credit investigation as L. Powell Acquisition Corp sees fit, including contacting trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks and credit reporting agencies to disclose to L Powell Acquisition Corp any and all information concerning the financial and credit history of my company and myself.

PERSONAL GURANTEE: If the credit customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased on credit by the corporation.

I have read the terms and conditions stated below and agree to all of these terms and conditions.

Authorized Signature

Date

Printed Name & Title

Social Security #

GENERAL TERMS AND CONDITIONS

Invoices are to be paid in full within the credit terms granted. Invoices not paid within these terms will be considered past due. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.