



Credit Application

9750 Aberdeen Road
Aberdeen, NC 28315

p: (910) 944-8700
f: (910) 944-8719

e: accounting@tacticalgeardistributors.com

BUSINESS AND CREDIT INFORMATION			
Company name:		Credit Limit Requested:	
Primary business address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
How long at current address?			
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account:			
<input type="checkbox"/> Savings	<input type="checkbox"/> Checking	<input type="checkbox"/> Other:	
Account number:			
BUSINESS / TRADE REFERENCES			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
AGREEMENT			
1. All invoices are to be paid 30 days from the date of the invoice. Past Due, 7 Days - 2% per month. 2. Claims arising from invoices must be made within seven working days. 3. By submitting this application, you authorize Tactical Gear Distributors to make inquiries into the banking and business/trade references that you have supplied.			
SIGNATURES			
Signature:		Date Reference Requests Sent:	
Printed Name:		Date Received:	
Title:		Credit Limit Approved:	
Date:		Approved By:	