Online

Credit Application & Order Form

746 Selby Ave St. Paul, MN 55104   toll free 800.328.8170   fax 651.222.1739

MyTana

Company Information

Company Name _____   Phone _____

Business Address _____   Fax _____

City, State _____ Zip _____   Email _____

Order Information

Shipping Address *(if different from above)*

Part Number or Description	Quantity	Unit Price	TOTAL

FOB: St. Paul, MN

Please call for shipping charges!

MN residents add 6.5% sales tax and 7% in metro areas

Purchase Total $ _____

Shipping/MN Sales Tax $ _____

Grand Total = $ _____

Credit/Payment Information

I am interested in: ❏ Credit card   ❏ Net30

Choose *ONE* lease option
❏ 1 year   ❏ 3 year

Credit Card # _____ Name on card _____ Exp Date _____

Name of Owner _____   SS # (*Required*) _____ – _____ – _____

Address (if different) _____   Years in business? _____

City, State _____   Zip _____

Bank Reference

Name of Bank _____   Acct # _____

Address _____   Phone _____

City, State/Zip _____   Contact _____

Trade References

1. Reference Company _____   Phone _____

Address _____   Contact _____

City, State _____   Zip _____

2. Reference Company _____   Phone _____

Address _____   Contact _____

City, State _____   Zip _____

3. Reference Company _____   Phone _____

Address _____   Contact _____

City, State _____   Zip _____

Authorization

I hereby certify that the information contained herein is true and accurate to the best of my knowledge. I hereby authorize the release of credit information from credit references listed above.

Applicant's signature is required.

*Applicant Signature _____   Date _____