

## 181 Oakleaf Oval

Oakwood Village, Ohio 44146 Phone: 440-439-4000 Fax: 440-439-5764

Phone: 440-439-4000 Fax: 440-439-5764							
Credit Application						Credit line requested:	
Corporate Name			Tax Payer ID #			\$	
Trade Name (DBA)			Phone Number				
Address			Fax Number				
City			State			Zip	
Email Address for primary contact			Email Address for billing contact				
Name of Gibson Machinery Salesperson:							
Type of Ownership: ☐ Corporation ☐ Partnership ☐ Government ☐ Non Profit ☐ LLC							
Type of Ownership: □ Corporation □ Partnership □ Government □ Non Profit □ LLC  Require PO: □ Yes □ No Sales Tax Exempt: □ Yes □ No - If yes, please attach sales tax exemption certificate.							
Date Incorporated and State  Sales Tax Exempt: 1 Tes 1 No - If yes, pleas  Type of Busines							
Type of Busine						" of Employees	
Bank Name	I	Branch			Address		
Phone Number	Account (s)			Account (s)			
List Owners or Officers:	lm: a				a		
1) Name	Title				Social Security #		
Address	Phone Num (		lber )	-			
2) Name	Title	Title			Social Security #		
Address		Phone Num	lber )	-			
Trade References: Separate Page of Trade References Attached:   Yes  No - If No, fill out below information in full.							
1) Name Ad			lress				
Phone Number			Fax Number				
Email Address:							
2) Name Addre							
Phone Number			Fax Number				
Email Address:							
3) Name Addr							
Phone Number  ( ) - ( )			per _				
Email Address:				<del>-</del>			
<ol> <li>The undersigned purchaser agrees to honor and satisfy all payments terms and conditions as indicated on each invoice.</li> <li>A service charge of 1.5% per month will be assessed against any past due balance.</li> <li>The undersigned agrees that in the event the account becomes delinquent to pay all costs incurred by Gibson Machinery LLC needed to enlist the services of a collection agency or attorneys in order to collect the outstanding balance.</li> <li>The undersigned applicant authorizes and grants Gibson Machinery LLC the right to investigate all information provided credit references and banking.</li> </ol>							
Signature					Date		
Print/Type Name					Title		
Credit Department use only							

Customer Number: Credit limit: Date approved:

Approved by: