



Bert R. Hybels, Inc.
3322 Grand Prairie
Kalamazoo, MI 49006

Credit Dept. Fax: 269-341-9143 Phone: 269-382-4921 Email:krish@hybels.com

Credit Application

(Please print clearly)

1. **Company Name** _____

Phone _____ **Fax** _____ **Email** _____

* **Physical Address** _____

* **Mailing Address** _____

2. **Check One:** **Corporation** _____ **Partnership** _____ **Proprietorship** _____

Years at Present Location _____ **Years in Business** _____

Principals: **Name** **Position** **Address**

A) _____

B) _____

C) _____

3. **Anticipated yearly purchases** _____ **Credit line desired** _____

4. **Resale Tax ID Number:** _____ **Federal ID Number:** _____

5. **Financial Information:**

Bank _____ **Account #** _____

Address _____

Phone _____ **Fax** _____

Email _____

6. References (List 3 major suppliers you are currently doing business with)

Name _____

Phone _____ Fax _____ Email _____

Name _____

Phone _____ Fax _____ Email _____

Name _____

Phone _____ Fax _____ Email _____

WITH CREDIT APPROVAL:

TERMS: Applicant is hereby advised that our regularly stated terms are net 14 days. Past due accounts will be assessed a service charge of 1.5% per month, or at a rate not to exceed lawful limits.

CLAIMS must be reported within 24 hours of receipt of merchandise to be guaranteed credit.

ADDITIONAL PROVISIONS OF OUR COMPANY INCLUDE: In the event it becomes necessary for our firm to file suit to enforce payment, we shall be entitled to the cost of collection, court costs, attorney's fees, and interest at the rate of 1.5% per month on all amounts due and payable.

I have read, understand, and accept the above terms, have provided true information to the best of my knowledge, and have retained a copy for my records. I authorize the above cited references to supply pertinent information as may be required to determine our credit capabilities.

PERSONAL GUARANTEE: I agree to the above terms and conditions stated and do assume personal liability for payment of said applicant's account. It is understood that credit may not be extended to said applicant without this personal guarantee.

I have read and fully understand the above.

Corporation (officer must sign) Partnership (two partners) Proprietorship (owner)

Date _____

Signature _____ Title _____ SS# _____

Date _____

Signature _____ Title _____ SS# _____