

**CONTACT INFORMATION**

Name:		Title:	
Company Name:			
Company Address:			
Company Address:			
City:		State:	ZIP Code:
Purchasing Contact:			
Phone:		Email (Required):	
Accounts Payable Contact:			
Phone:		Email (Required):	
Web Address:			

BUSINESS INFORMATION

Type of Business:	In Business Since:
If Division/Subsidiary, Name of Parent Company:	
☐ Sole Proprietorship ☐ Partnership ☐ Corporation	
Dun & Bradstreet #:	FEIN:
☐ Check if Tax Exempt (Must Include Resale License)	

BANK INFORMATION

Institution Name:		
Contact:	Email:	
Address:		
City:	State:	ZIP Code:

Type of Account	Account Number
Checking	
Savings	
Other	

TRADE REFERENCES

Company Name:		
Contact:	Phone:	Email:
Address:		
City:	State:	ZIP Code:
Type of Account:		
Account Opened Since:	Credit Limit:	Current Balance:

Company Name:		
Contact:	Phone:	Email:
Address:		
City:	State:	ZIP Code:
Type of Account:		
Account Opened Since:	Credit Limit:	Current Balance:



Company Name:		
Contact:	Phone:	Email:
Address:		
City:	State:	ZIP Code:
Type of Account:		
Account Opened Since:	Credit Limit:	Current Balance:

Standard terms are Net 30 days unless otherwise specified. The customer agrees to pay for all purchases within the terms granted. The customer assumes full responsibility for all materials purchased. The customer agrees to notify DRC within 10 days of any billing discrepancies and 30 days of any merchandise defects. Failure to do so signifies responsibility for prompt payment in full. Merchandise must be returned within 30 days of invoice date and in original sales condition. DRC will not accept any returned merchandise without an issued RGA. Warranty is limited to repair or replacement of parts or refund of the purchase price and is solely at DRC's discretion.

The customer agrees to pay all costs for collections, including but not limited to late charges, finance charges, collection agency fees, attorney's fees, and all legal fees under the extent permissible by law.

SIGNATURES

I hereby agree to the terms and conditions above. I certify that the information contained herein is complete and accurate. I understand that the information provided will be used to determine the amount and conditions of credit to be extended. Furthermore, I hereby authorize the financial institutions and Trade References listed in this credit application to release necessary information to the company for which credit is being applied to verify the information contained herein.

Print Name:	Print Name:
Signature:	Signature:
Title:	Title:
Date:	Date:

PLEASE NOTE: A CREDIT CHECK CAN TAKE AS LITTLE AS 24 HOURS AND AS LONG AS 2 WEEKS AND IS BASED UPON YOUR TRADE REFERENCES TIMELY RESPONSE TO OUR CREDIT REQUEST. PLEASE USE A CREDIT CARD FOR EXPEDITED ORDERING.