



Credit Application for Company or Corporation
Complete & Fax to 201-438-0446



Please Check One	<u>Proprietorship</u> <input type="checkbox"/>	<u>Corporation</u> <input type="checkbox"/>	<u>Partnership</u> <input type="checkbox"/>
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Name: _____

Billing Address: Street _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Ship To: Street _____

City _____ State _____ Zip _____

Number of Years in Business: _____ Type of Business: _____

Are Purchase Orders Required: _____ Tax Exempt Number: _____ *(Attach Copy of Certificate)*

Bank References:

Name _____	Address _____
Telephone _____	Contact <i>(if any)</i> _____

Trade References:

Name _____	Name _____	Name _____
Address _____	Address _____	Address _____
Telephone _____	Telephone _____	Telephone _____
Fax _____	Fax _____	Fax _____

Signature of person making application _____ Title _____ Date _____

Terms: *Net 30 Days. Customer agrees to a charge of 1½% per month on all open balances over 60 days. Furthermore customer will pay all legal fees in the event of suit.*

Approved By: *(Print)* _____ Signature _____ Title _____

Lyndhurst, NJ. 201-438-1500	Edison, NJ. 732-225-4330	Ewing, NJ. 609-882-6330	Elmsford, NY. 914-592-1212	New York City 212-772-0581	www.napconet.com
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