



CREDIT APPLICATION FOR A BUSINESS ACCOUNT

26352 Lawrence Center Line, MI 48015
Phone: 586-758-4440 Fax: 586-758-0740
Website: www.arrepairs.com

BUSINESS CONTACT INFORMATION

Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP Code:	
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:

BUSINESS AND CREDIT INFORMATION

Primary business address:			
City:	State:	ZIP Code:	
How long at current address?			
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:	State:	ZIP Code:	
Type of account	Account number		
Savings			
Checking			
Other			

BUSINESS/TRADE REFERENCES

Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			

AGREEMENT

Application cannot be processed unless this section has been signed.

- All invoices are to be paid 30 days from the date of the invoice.
- Claims arising from invoices must be made within seven working days.
- By submitting this application, you authorize AR Repairs Baker's Kneads make inquiries into the banking and business/trade references that you have supplied.
- Please attach a copy of your Resale Certificate for each state in which you are exempt. Unless a copy of your resale certificate is attached, we must treat you as TAXABLE and charge any local, county, and state sales taxes.
- I understand and agree that a service charge of 2% per month, but not in excess of the lawful maximum, will be added on any past due amount. In addition, I further understand and agree that if my account becomes significantly past due and is referred to an attorney or collection agency, collection costs will be added to the account.
- I authorize the release of financial and credit data by any vendor with whom we do business to AR Repairs Baker's Kneads. The purpose of this information is to establish open account for the purchase of supplies and will be held in strict confidence.

SIGNATURES

X:		X:	
Title:	Date:	Title:	Date: