



CREDIT APPLICATION FORM

Company Name: _____

Mailing Address: _____

Street Address: _____

Telephone: _____

Subsidiary: Yes: _____ No: _____

Parent Company Name: _____

Address: _____

Address: _____

Telephone: _____

Entity Type: Corp _____ LLC _____ Partnership _____ Proprietorship _____

D&B#: _____

Federal Tax ID#: _____

Year Started: _____

Payment Terms Requested: (A) Net 30 (B) 2% 10 Net 30 (C) Other _____

Principal Business: _____

Chief Executive Officer: _____ Financial Officer: _____

Principal Bank: _____ Account Officer: _____

Address: _____

Telephone: _____ Email: _____

Credit References

Name: _____ Name: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

Name: _____ Name: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

IF TAX EXEMPT, PLEASE ATTACH A COPY OF THE EXEMPTION CERTIFICATE TO THE COMPLETED APPLICATION

I hereby authorize and direct that an investigation be made of the above references, and agree to hold Eagle Pipe, LLC harmless from any action arising out of the legitimate and proper conduct of those investigations.

Signature: _____

Title: _____

Officer, Owner or Authorized Individual

Date: _____