

Application For Business Credit

Parris Manufacturing Company

P.O. Box 338

Savannah, TN. 38372

1-800-530-7308

Phone: (731) 925-3918 Fax(731) 925-1139

Applicant's Name _____

Address _____

Phone _____

Fax _____

Contact _____

Please list Bank and three current trade references

Bank reference _____

Address _____

1. Trade Ref _____ Account# _____ Fax# _____

Address _____

2. Trade Ref _____ Account# _____ Fax# _____

Address _____

3. Trade Ref _____ Account# _____ Fax# _____

Address _____

Terms and Conditions

PLEASE FURNISH FAX NUMBER FOR CREDIT REFERENCES

Applicant's signature attests financial responsibility, ability, and willingness to pay for product supplied according to our credit terms which are net 30 days. Parris Mfg. Company (Hereinafter referred to as Parris) reserves the right to charge interest for invoices not paid according to these terms at the rate of 1 1/2% per month on the unpaid balance. Parris also reserves the right to limit or terminate credit if account is not paid according to these terms and conditions.

General Provisions

This application and the information contained herein is a request for the extension of credit for business use only. The applicant authorizes Parris to obtain a written or oral credit report from any reporting agency. Applicant further authorizes any bank or business with whom the applicant is doing or has done any type of business to give any and all necessary information to Parris which will assist Parris in it's credit investigation. The applicant further authorizes Parris to investigate the applicant's credit status from time to time as Parris deems necessary. Any changes in legal status must be communicated to Parris by Certified mail. The original applicant will remain liable until such time as Parris has received notice of the change in legal status and been given a reasonable period of time to respond to such notice. Further, should this account be placed for collection the applicant agrees to pay all costs of collection including but not limited to attorney fees of 25%.

Date _____ Applicant's Signature _____

For Credit Department use only:

Date _____ Approved Denied