



Credit Application

Please send completed applications to orders@sirenmarine.com

New Account Application

Account Name: _____ Application Date: _____
 Rep Name: _____ Application Type: Credit Card Terms
 Address: _____
 Phone #: _____ Street _____ City _____ State _____ Zip code _____
 Fax #: _____ Email Address: _____

Applicant acknowledges and agrees that if this application is approved by Siren Marine Inc., that the applicant shall abide by the Siren Marine credit policy, requirements and terms. Further, it is acknowledged and agreed that Siren Marine reserves the right at any time, in its sole discretions, to modify the account requirements and/or terms, including the right to cancel the account. Past due accounts are subject to interest at the rate of 1.5% per month on the past due amount. Should it become necessary for Siren Marine to enforce its right to payment on the account by legal process, including engaging attorneys who, without suit, assist in the collection of the account, then applicant shall be responsible, in addition, to all other sums owed on the account, for all reasonable attorney's fees and costs sustained.

Sales tax must be collected on any purchases unless a copy of the sales tax certificate is provided.

Signature of Applicant: _____
 All Applications Must Be Signed And Completed To Be Processed

 Not necessary to complete this section unless an open account with Siren Marine is desired.

Credit Information:

How long in business at this address: _____
 Tax I.D number: _____
 D-U-N-S #: _____

Credit References: (Please list banking, financing & trade references or attach your own list)

Name	Address	City	State	Zip	Phone	Fax
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Bank Info:

Name	Address	City	State	Zip	Phone	Fax
_____	_____	_____	_____	_____	_____	_____

Guaranty: The undersigned Guarantor agrees to be responsible to Siren Marine Inc. for payments of all amounts that may be owed to Siren Marine Inc. by _____ and/or his/her assigns and/ or successors (heirs).

 Guarantor's Signature Printed Name of Guarantor Address of Guarantor

AUTHORIZATION TO RELEASE BANK REFERENCES

This is my authorization to release information to Siren Marine for the purpose of supporting the credit application & establishing an open credit line.

Bank Name: _____ Bank Address _____

Phone # _____ Fax # _____

Contact Name _____ Account # _____

Authorized Signature _____ (Please sign all places to complete application)