



Material Handling Equipment

Trucks • Casters • Wheels

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

Business Contact Information

Company name		<input type="checkbox"/> Individual	Years in Business:
Billing Address		<input type="checkbox"/> Partnership	
Shipping Address		<input type="checkbox"/> Corporation	Resale Tax No.:
Phone Fax		<input type="checkbox"/> Other	
E-mail			

Additional Information

PURCHASING		ACCOUNTS PAYABLE	
Name		Name	
Phone		Phone	
Email		Email	

Business/Trade References

(Please list accounts established for two or more years *and* a line of credit equal to that which you are requesting.)

Company Name		Email 1	
Address		Email 2	
City, State ZIP Code		Phone	
Company Name		Email 1	
Address		Email 2	
City, State ZIP Code		Phone	
Company Name		Email 1	
Address		Email 2	
City, State ZIP Code		Phone	
Company Name		Email 1	
Address		Email 2	
City, State ZIP Code		Phone	

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Order minimum of \$25.00
3. Orders are subject to 20% Restock Fee if applicable (special orders that need to be brought in explicitly for your application).
4. By submitting this application, you authorize Mapp Caster & Supply to make inquiries into the business/trade references that you have supplied.

Signature

Name and Title			
Signature		Date	

Direct Factory Representative • Stocking Dealer • Custom Fabrication

320 N. Sampson • Houston, Texas 77003

(713) 227-1144

FAX: (713) 227-5158

(800) 798-3309