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CREDIT APPLICATION FOR BUSINESS ACCOUNT

APPLICANT Legal Business Name: (Include All Trade Names, DBA's: Divisions & Subsidiaries) Physical Address: ____ Physical City, State, Zip: Account Contact: Billing Address: Billing City, State, Zip: Billing Contact: Phone Number: Fax Number: Email Address: In Business Since: Federal Tax Number: ______ Sole Proprietership Partnership Type of Business: Corporation/LLC Other How would you like your invoices and statements delivered? (Check the appropriate box(es) and list the contact information) Mail: **CREDIT INFORMATION** Primary Business Address: City, State, Zip: How long at current address? Primary Business Bank: _____ Bank Address: _____ Contact Person: City, State, Zip: Phone Number: _____ Fax Number:

Type of Account:

Savings Checking

Other

Email Address:

CREDIT REFERENCES Company Name: _____ Company Contact: ____ City, State, Zip: Phone Number: Fax Number: Type of Account: Email Address: Company Name: _____ Address: _____ Company Contact: City, State, Zip: Phone Number: _____ Fax Number: Type of Account: Email Address: Company Name: ____ Company Contact: City, State, Zip: Phone Number: Fax Number: Type of Account: Email Address: **AGREEMENT** The undersigned agrees to pay the account in full by by the 20th of each month following any purchases. In the event of late payment, a finance charge of 2% per month will be applied to any outstanding balance until paid in full. The applicant also agrees to be responsible for all collection fees, including reasonable attorney's fees, if necessary. By submitting this application, you authorize **Cowboy Station** to verify the banking and trade references provided. Credit limits will be established at the sole discretion of Cowboy Station.