SEAL AFTERMARKET
PRODUCTS

www.sealaftermarketproducts.com

CREDIT APPLICATION

LEGAL NAME OF COMPANY _____

COMPANY DBA (If Applicable) _____ D&B # _____

COMPANY BUSINESS ADDRESS _____

COMPANY WEBSITE ADDRESS _____ No. OF EMPLOYEES _____

MAIN PHONE NUMBER (_____) _____ - _____ FAX NUMBER (_____) _____ - _____

DATE ESTABLISHED_____ ☐ CORP. ☐ SOLE PROPRIETORSHIP ☐ PARTNERSHIP ☐ LLC

THE OWNERS OR PRIMARY STOCKHOLDERS ARE:

NAMES (S) TITLE EMAIL ADDRESS (Work) RESIDENCE ADDRESS CITY/STATE PHONE

_____

_____

ACCOUNTS PAYABLE CONTACT & EMAIL ADDRESS: _____

AMOUNT OF CREDIT LINE REQUESTED: _____

IS THERE AN ORDER PENDING: ☐ YES ☐ NO IF YES: ORDER AMOUNT: _____

ESTIMATED MONTHLY PURCHASES: 1st Year: _____ 2nd Year: _____

FOR CREDIT LINE REQUESTS > $25,000, FINANCIAL STATEMENTS MAY BE REQUIRED.

FINANCIAL STATEMENTS ARE ATTACHED: ☐ YES ☐ NO

BANK ACCOMMODATIONS:

BANK NAME_____ PHONE _____ FAX _____

BANK ADDRESS _____

TYPE OF ACCOUNT ☐ CHECKING ☐ SAVINGS ACCOUNT No. _____

COMPANY HAS A BANK CREDIT LINE? ☐ YES ☐ NO IF YES: Acct. No. _____

Applicant: I authorize the above financial institution to release credit information and deposit information to Seal Aftermarket Products LLC.

_____

Signature Print name

TRADE REFERENCES:

COMPANY NAME CONTACT CITY STATE ZIP PHONE FAX

1- _____

2- _____

3- _____

In consideration of Seal Aftermarket Products LLC (hereafter referred to as SAP or Seller) extending credit to Buyer, Buyer agrees to pay for all items delivered to or at the request of Buyer by Seller within the stated terms of the invoice for said items. All accounts are due and payable at the remittance address shown on the Invoice.

Buyer agrees to pay to Seller, pursuant to the terms set forth by agreement between Buyer and Seller. In the event Buyer does not pay the amounts due pursuant to the terms of the agreement between Buyer and Seller, Seller reserves the right to charge interest, which the Buyer agrees to pay at a rate of 18% per annum (1.5% per month) on the outstanding balance that is past due, until the account is paid in full or brought into current standing.

_____

Printed Name of Applicant Signature

Return by FAX: **954-364-2291** or EMAIL: CreditRequest@sealsap.com

10.12