

Application for Credit

The Chapin & Bangs Co.

P.O. Box 1117 • Bridgeport, CT 06601
Phone: (800) 972-9615 • Fax: (855) 348-4268 • credit@cbsteel.com
ATTN: Credit Department

Company Name _____

Mailing Address: Street: _____

City: _____ State: _____ Zip: _____

Shipping Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Tax Exempt #: _____

Years in Business: _____ Type of Business: _____

Type of Ownership: Corporation Partnership Individual

Principal Owners or Officers

Name	Title	Address	City	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Application for credit is hereby made and the following references given. It is understood this information will be held in strictest confidence and used only by your Credit Department.

Please give at least three commercial references **PREFERABLY METAL RELATED** plus one bank. List number of years you have been doing business with each firm.

If your purchases are exempt from sales tax, please include a completed copy of the appropriate resale or exemption certificate.

Name: _____ Phone: _____

Address: _____ Fax: _____

_____ Email: _____

Name: _____ Phone: _____

Address: _____ Fax: _____

_____ Email: _____

Name: _____ Phone: _____

Address: _____ Fax: _____

_____ Email: _____

BANK REFERENCE

Name: _____ Bank Officer to Contact: _____

Address: _____ Account #: _____

City: _____ State: _____ Zip: _____ Phone: _____

We understand this application for credit is subject to your approval and we agree to comply with the terms of 1/2% 10/Net 30 days from date of invoice.

Signed: _____ Title: _____ Date: _____

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165 River Street
PO Box 1117
Bridgeport, CT 06601-1117
tel: (800) 972-9615
fax: (855) 348-4268
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Credit Agreement

In the event our account is not paid according to the terms set forth on the invoice or statement, we agree to pay a service charge of 1½ % per month (or the maximum allowed under the applicable state laws) on the principal balance during the term of delinquency. If the account becomes more than 30 days delinquent and is placed for collection, we agree to pay reasonable collection charges and if placed in the hands of the attorney for collection or suit, we agree to pay reasonable attorney fees. It is expressly understood and agreed that the terms and conditions of quotation and sale are incorporated by reference herein and are part of the contract between the parties. The party or parties signing the application certify that the name of the firm as stated below is correct, that the firm is not insolvent, and that if the firm is a corporation, it is in good standing. The above information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Chapin & Bangs, to whom this application is made, to investigate the references listed pertaining to my/our credit and financial responsibility.

This statement (both the printed and written matter) has been carefully read by the undersigned. I/We hereby represent and warrant that this statement is a full, complete, and correct statement of financial condition and full disclosure of all debts, financial obligations and liabilities. This statement is given to induce Chapin & Bangs to extend credit. I/We intend for Chapin & Bangs to rely on the statement not only for the purpose of the immediate transaction, but also with respect to all future dealings and transactions. I/We understand that the giving of false information in the statement may subject me/us to civil and criminal liabilities and may be the basis of denying me/us a discharge in bankruptcy. A twenty-five dollar (\$25) NSF check fee will be assessed for each time a check is deposited and returned.

Authorized Signature _____ Title _____
(Officer of Corporation, Partner or Sole Proprietor)

Name (Print) _____ Date _____