



APPLICATION FOR OPEN ACCOUNT

FASTBOLT CORPORATION

200 Louis Street
South Hackensack NJ 07606
(201) 440-9100 Fax: (201) 440-9297

Internal use only
Branch Location:
Sales Rep:

Date:

Credit Limit Request:

Duns Number:

FEI Number:

PLEASE PRINT

Business Name: Date Established:

Billing Address: City: State: Zip:

Phone #: Fax#:

Type of Business Sole Proprietorship Partnership Corporation - State of Subsidiary Division of

A/P Contact Name: A/P Contact Email Address:

A/P Phone #: A/P Fax #:

Tax Exempt? Y N **** IF YOU ARE EXEMPT, PLEASE ATTACH A COPY OF YOUR EXEMPT CERTIFICATE ****

Bank Reference

Bank Name:

Street Address: City: State: Zip:

Phone #: Fax #: Contact Person:

List of all Applicable Account #'s

Trade References

Company Name: Phone #: Fax #:

Company Name: Phone #: Fax #:

Company Name: Phone #: Fax #:

The undersigned applies for open account credit with Fastbolt Corporation and agrees that all sales made pursuant to this application will be subject to the terms and conditions of sale set forth. All statements made herein are true and accurate to the best of our knowledge. We authorize the above company to make all inquiries necessary for action on this credit application. We hereby indemnify the above company and its agents, from any liability from their credit survey.

Authorized Signature: Title:

Print Name: Date:

Credit Approved for \$ Credit Disapproved By: Date: