

Wisco Stone LLC
CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Company name:		
Phone:	Fax:	Billing E-mail:
Shipping Address:		
City:	State:	ZIP Code:
Billing Address (If different):		
City:	State:	ZIP Code:
Invoices are emailed by default. Please check the box if you prefer invoices mailed: <input type="checkbox"/>		

BUSINESS AND CREDIT INFORMATION

Primary Purchasers Contact:		
Phone:	Fax:	Email:
Primary Payable/Receivable Contact:		
Phone:	Fax:	E-mail:
Bank name:		
Bank address:		Phone:
City:	State:	ZIP Code:
Type of account		
Savings		
Checking		
Other		

BUSINESS/TRADE REFERENCES

Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		

AGREEMENT

1. All bills are to be paid 10 days from the invoice date. 2.5% monthly finance charges will be applied after 10 days.
2. Claims arising from invoices must be made within 5 business days.
3. By submitting this application, you authorize Wisco Stone LLC to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Title: Date:	Title: Date:
-----------------	-----------------