Anabec, Inc. Credit Application for N/30 Terms

The undersigned company is applying for credit with Anabec, Inc. and agrees to abide by the standard terms and conditions of Anabec, Inc. as printed on page 2. This form must be completed in full and faxed to 877-241-8560 or e-mailed to kim@anabec.com. If you have questions regarding this form please call us us at 716-759-1674 or 800-369-8463.

Business Name/Address/Principal Name

Last:	First:	Title:
Name of Business:		Tax ID Number:
Address:		
City:	State:	Zip:
Phone:	Fax:	E-Mail:
Company Information		
Type of Business:		In Business Since:
Legal Form Under Which the	e Business Operates:	
Corporation	Partnership	Sole Proprietorship
	e, E-mail of CEO, President or Partners (List	
Last:	First:	Title:
Address:		
Business Phone:	Cell Phone:	E-Mail:
Last:	First:	Title:
Address:		
Business Phone:	Cell Phone:	E-Mail:
Amount of Credit Requested	d?	
Are you Sales Tax Exempt? If yes, we will need a copy o	Yes I of your sales tax exempt form to be kept o	No n file.

Authorized Purchasers

Last:	First:	Title:
Phone:	Fax:	E-Mail:
Last:	First:	Title:
Phone:	Fax:	E-Mail:
Are Purchase Orders Required?	Yes No	

Bank Reference #1

Name of Bank:	Phone Number:	Fax Number:
Address:	I	I
Contact Name:	Savings or Checking:	Account #:
Bank Reference #2		
Name of Bank:	Phone Number:	Fax Number:
Address:		
Contact Name:	Savings or Checking:	Account #:
Trade Reference #1		
Name:	Phone Number:	Fax Number:
Address:		
Contact Name:	E-mail Address:	Account #:
Trade Reference #2		
Name:	Phone Number:	Fax Number:
Address:	I	I
Contact Name:	E-mail Address:	Account #:
Trade Reference #3		
Name:	Phone Number:	Fax Number:
Address:	I	I
Contact Name:	E-mail Address:	Account #:
My Company and I authoriz above trade references and	e Anabec to make such credit invest I banks to obtain credit reports. I als	habec, Inc. to extend credit to the applicant. tigations as sees fit, including contacting the o agree and give authorization for these ec any and all information concerning the

financial and credit history of my company.

No Credit will be extended to past due accounts unless satisfactory arrangments have been made.
Any Invoice not paid within the terms of this agreement will incur a 5% late fee.

I have read the terms and conditions listed above and are in agreement with them.

Authorized Signature:	
Printed Name and Title:	
Date:	