



# Customer Credit Application

## Customer Credit Application Instructions:

- Print the form & then fill it out by hand.
- Sign on the Authorized Signature line at the bottom of Page 2.
- Page 2 option: Either complete the Credit References section on Page 2 of this form or attach a copy of your Credit References form.
- Bearings Limited requires the Bank Reference section on Page 2 to be completed along with an authorized signature on the line provided at the bottom of Page 2 to enable Bearings Limited to check with your bank.
- Please Fax the signed Customer Credit Application together with a copy of your Sales Tax Certificate and a Line Card or other material describing your business to **(631) 273-8257**.

## Customer Information

Legal Business Name:			Phone #:		
Trade Name (DBA):			Fax #:		
BILL-TO	Address 1:		Address 2:		
	City:		State:	Zip:	
SHIP-TO	Address 1:		Address 2:		
	City:		State:	Zip:	
How do you classify your business? (circle one) <b>Corporation / LLC / Partnership / Proprietorship</b>			Year Established:	State of Incorporation:	
Federal I.D. #:			Dun & Bradstreet #:		
E-Mail Address:			Website Address:		
Are you a: (circle one) <b>Subsidiary / Division</b>		Parent Company Name:			
Address 1:		Address 2:			
City:		State:	Zip:		
Have you ever declared Bankruptcy: (circle one) <b>Yes / No</b>		<i>If you have filed for bankruptcy, please attach an explanation</i>			
A/P Contact:		A/P E-Mail Address:			
A/P Phone #:		A/P Fax #:			
Please indicate (circle one) <b>Principal / Partner / Proprietor / Other (Specify)</b> _____					
Name:				Home Phone:	
Home Address:				Birth Date:	
City:				State:	Zip:
Social Security #:			E-Mail Address:		



# Customer Credit Application

## Terms Requested

(Indicate Preference)

- Net 30 – Credit Line Requested \$ \_\_\_\_\_
- C.O.D. (Certified Checks Required for Amounts over \$500)

## Bank Reference (Require Fax #)

Primary Account Type: (circle one) Checking / Savings	Primary Account Number:	Date Account Established:	
Name:		Contact:	Phone #:
Address:			Fax #:
City:		State:	Zip:

## Trade References (Require Fax #)

1.	Name:	Contact:	Phone #:
	Address:		Fax #:
	City:	State:	Zip:
2.	Name:	Contact:	Phone #:
	Address:		Fax #:
	City:	State:	Zip:
3.	Name:	Contact:	Phone #:
	Address:		Fax #:
	City:	State:	Zip:

- This application and agreement is submitted by Customer to Bearings Limited (BL) in order to establish an account and/or obtain trade credit.
- Customer agrees to make payment in full to Bearings Limited for all amounts due according to Bearings Limited's invoice on or before net due date.
- Bearings Limited standard credit terms are Net 30.
- Customer also agrees to pay interest on all amounts that are past due. Interest will be charged as 1.5% per month or the highest rate allowed by law.
- If Customer should default on any payment(s), Bearings Limited reserves the right to declare all invoice amounts due and payable without notice to Customer.
- Additionally, Customer will be responsible for all collection costs and attorney fees, whether suit is filed or not, in order to collect any delinquent amount.
- Customer also agrees to provide Bearings Limited with updated credit information on request, as a condition for the continued extension of credit.
- The undersigned certifies that all of the information contained herein and any attachments are true and correct to the best of their knowledge and belief.
- Customer agrees to adhere to terms, policies and procedures established by Bearings Limited.

**Your below signature will act as written authorization for Bearings Limited to obtain banking information from the above referenced bank, required to establish your line of credit.**

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Authorized Individual (Please Print Name)

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Bearings Limited**  
2100 Pacific Street  
Hauppauge, NY 11788

Toll-Free: (800) 645-5088  
Fax: (631) 273-8257  
[sales@bearingslimited.com](mailto:sales@bearingslimited.com)