

Application for Credit

Company Name: _____ **Date:** _____

Duns # _____ **Amount of Line Requesting:** _____

Billing Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Shipping Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **County:** _____

AP Contact Name: _____

AP Email Address: _____ **AP Phone:** _____

Invoice Distribution

Mail Email to: _____

Ownership

Individual Partnership Corporation

Fed ID # _____ **Date started:** _____

Is this business a subsidiary/affiliate of any other entity? Yes No

If yes, please identify the entity: _____

Names of Officers or Owners

Name: _____ **Title:** _____

Name: _____ **Title:** _____

Application for Credit

Company Name: _____

Credit References

| | | | | | |
|------------|--|-------|--|-----|--|
| Trade Name | | | | | |
| Contact | | Email | | | |
| Phone | | Fax | | | |
| Address | | | | | |
| City | | State | | Zip | |

| | | | | | |
|------------|--|-------|--|-----|--|
| Trade Name | | | | | |
| Contact | | Email | | | |
| Phone | | Fax | | | |
| Address | | | | | |
| City | | State | | Zip | |

| | | | | | |
|------------|--|-------|--|-----|--|
| Trade Name | | | | | |
| Contact | | Email | | | |
| Phone | | Fax | | | |
| Address | | | | | |
| City | | State | | Zip | |

| | | | | | |
|--------------------|--|----------------|--|-----|--|
| Bank Name | | Phone | | | |
| Address | | Fax | | | |
| City | | State | | Zip | |
| Checking Account # | | Loan Account # | | | |

**** If you are not to be charged sales tax, a copy of your tax exemption form must be attached to this credit application. ****

If credit is granted, Customer agrees to the terms noted on each invoice. Standard terms are set at net 30 days. Invoices past due may accrue interest at 1.5% per month. No terms or conditions different from the terms of Productivity will become part of any sales agreement, purchase order, or other document unless specifically approved in writing by Productivity. Customer agrees to pay all costs of collection or attempting to collect or secure any and all debts which Customer may now or in the future owe Productivity for goods sold or for services rendered including a reasonable attorney's fee. This agreement is made and entered into in Plymouth, Minnesota, and shall be governed and construed according to the Laws of the State of Minnesota. Customer agrees that any legal action relating to the agreement on the debt owed hereunder may be brought in any court located in Hennepin County, Minnesota. Customer fully understands Productivity's credit terms and agree to terms and conditions as set forth by the sales representative.

In support of this application, Productivity, Inc. is authorized to obtain credit and/or financial information from Customer's bank and/or any other credit reporting organizations. Customer authorizes its bank to provide to Productivity such information, as requested.

By signing below, Customer warrants that all financial information submitted is true and accurate and that credit will be extended based on the accuracy of the financial information furnished by Customer. **The person who signs below affirms that he or she is authorized to sign on behalf of Customer.**

Signature: _____

Printed Name: _____

Title: _____

Date: _____

Please return this form to: accountingcustomer@productivity.com