

CREDIT APPLICATION

BILLING NAME: _____

ADDRESS, CITY AND ZIP : _____

PHONE# _____ FAX# _____ EMAIL _____

ACCOUNTS PAYABLE CONTACT: _____

LEGAL ENTITY: (check one) Corporation Partnership Sole Proprietor

Principal _____ Title: _____ Type of Business: _____

DATE BUSINESS STARTED _____ ESTIMATED ANNUAL SALES _____

Federal ID# or SS# _____ Requested Terms: _____

(Our terms are based on Net 30days)

Resale # (required for Sales Tax Exemption)* _____

TRADE REFERENCES

Name: _____ Acct# _____ Ph# _____ Fax# _____

Address: _____

Name _____ Acct# _____ Ph# _____ Fax# _____

Address: _____

Name: _____ Acct# _____ Ph# _____ Fax# _____

Address: _____

Bank: _____ Acct# _____ Ph# _____ Fax# _____

Bank address: _____

Conditions of Sale

- No allowances after goods are cut. Customer or workroom is responsible to check for correct pattern and color before cutting.
- Accommodation returns are charged 25% and freight both ways. Cuts of 15 yards or less are not accepted for returns.
- All claims must be received in writing not more than fifteen (15) days from date of invoice. No returns accepted without authorization number. Call Customer Service for RA number.
- Fading or change in color due to chemical processes such as flame proofing, are not covered by our guarantee.
- A late charge of 2% per month, 24% per annum, will be charged on all past due accounts. There will be a \$25.00 net charge on returned checks.
- Kaslen Textiles makes no guarantee or warranty, expressed or implied, of fitness or merchantability with respect to their fabrics or manufactured products, except as expressly provided.
- In the event the account is placed with an attorney for collection, the purchaser shall be liable for all costs of collection, including attorney's fees.
- The undersigned consents to the release of credit and recognizes that if credit is extended, it may be cancelled without notice.

* I certify that if any property or service purchased tax-free is used or consumed by the firm as to make subject to Sales or Use tax I will pay the tax due. This certificate shall be part of each order placed with you and shall be valid until cancelled by us in writing or revoked by the city or state.

Date _____ Signature _____ Title _____