FERNSTRUM®

Credit Application

R.W. Fernstrum & Company
PO Box 97
1716 11th Ave
Menominee, MI 49858

This form must be signed & dated and must accompany all credit requests.

1. Company Info

Company Name _____ Owner/President _____

Address _____ Finance Manager _____

_____ General Manager _____

City _____ State/Prov _____ Postal Code _____ Credit Amt Requested _____

Purchasing Contact _____ Phone _____ Fax _____

A/P Contact _____ Phone _____ Email _____

May we email invoices? Yes ☐ No ☐ If yes, email invoices to: _____

DUNS # _____ Year Business Established _____ Fed Tax ID # _____

2. Banking Info

Bank Name _____ Bank Officer Contact _____

Address _____ Phone _____

_____ Date Account Opened _____ Acct Types ☐ Checking ☐ Savings ☐ Loan ☐ Line of Credit

City _____ State/Prov _____ Postal Code _____

Bank Name _____ Bank Officer Contact _____

Address _____ Phone _____

_____ Date Account Opened _____ Acct Types ☐ Checking ☐ Savings ☐ Loan ☐ Line of Credit

City _____ State/Prov _____ Postal Code _____

3. Financials

Attach a copy of your current balance sheet. Failure to do so may result in credit, if granted, being held to minimum levels which may not be adequate for your needs. We will hold all financial information that you provide strictly confidential.

4. Current Trade References

At least four current trade references are required. Place trade references on the next page in the area provided or attach a separate sheet that supplies all of the requested information. Incomplete information may result in refusal of credit.

5. Agreement

By requesting that R.W. Fernstrum & Company grant you credit, and by signing below, you agree to be bound by the credit terms offered by R.W.Fernstrum & Company. Per R.W. Fernstrum & Company policy, credit terms will not be granted for more than 30 days from date of invoice. In addition, in the event that any credit granted to your company becomes delinquent, you agree to pay interest at the rate of 1% per month (12% per year) and to pay any collection and/or legal fees associated with any attempt by us to collect amounts due us by your company.

6. Signature / Certification / Authorization

By signing below I certify that the information that I have provided on this form is true and correct to the best of my knowledge and that I am authorized to provide the information contained herein. I understand that any falsification of information may result in rejection of this application for credit by R.W. Fernstrum. I also authorize the bank and trade references that I have listed to provide R.W. Fernstrum with information relating to our accounts for the purpose of establishing credit.

Signature _____ Printed Name _____

Title _____ Date _____

5. Current Trade References: (4 required) **PLEASE INCLUDE FAX NUMBERS &/or EMAIL ADDRESSES**

1. Company Name _____ Contact Name _____
Address _____ Email Address _____
_____ FAX Number _____
City _____ State/Prov _____ Postal Code _____

2. Company Name _____ Contact Name _____
Address _____ Email Address _____
_____ FAX Number _____
City _____ State/Prov _____ Postal Code _____

3. Company Name _____ Contact Name _____
Address _____ Email Address _____
_____ FAX Number _____
City _____ State/Prov _____ Postal Code _____

4. Company Name _____ Contact Name _____
Address _____ Email Address _____
_____ FAX Number _____
City _____ State/Prov _____ Postal Code _____

5. Company Name _____ Contact Name _____
Address _____ Email Address _____
_____ FAX Number _____
City _____ State/Prov _____ Postal Code _____

6, Company Name _____ Contact Name _____
Address _____ Email Address _____
_____ FAX Number _____
City _____ State/Prov _____ Postal Code _____