



T-5 Distributors

1701 E. Pioneer
Irving, Texas 75061
(972) 438-7447 Office
(972) 579-0356 Fax

CREDIT APPLICATION

Name

Former Trade Name(s) (if any)

Street City State Zip

Mailing Address (If Different from Above) City State Zip

Office Phone Fax Number

Mobile Number Email Address

Type of Business Years in Business

(Individual, Partnership, or Corporation)

(If Tax Exempt, Certificate Must be Attached)

Sales and Use Tax Number

Social Security Number Texas Drivers License Number (Attach Copy)

Bank Bank Account Number

Street City State Zip

Bank Contact Bank Phone

Estimated Monthly Volume

Principal's Name(s)

Street City State Zip

Social Security Number Email Address

Office Phone Fax Number

Mobile Phone Home Number

Principal's Name(s)

Street City State Zip

Social Security Number Email Address

Office Phone Fax Number

Mobile Phone Home Number

TRADE REFERENCES			
COMPANY NAME	CONTACT	PHONE	FAX

In exchange for the granting of an open account with T - 5 DISTRIBUTORS, customer hereby agrees that all invoices will be paid within the terms established by T-5 Distributors, Inc. Customer further agrees to the payment of one and one-half percent interest per month on all past due invoices. Customer also agrees that venue in any legal action between Customer and T-5 Distributors Inc. will be Dallas County and that Customer will be liable for all court cost and legal fees, if Customer fails to prevail in such action.

Signature (Principal or Authorized Agent) Date

Printed Name

Signature (Principal or Authorized Agent) Date

Printed Name