

FULCRUM LIFTING™ LLC CREDIT APPLICATION

5246 WOOSTER ROAD CINCINNATI, OH 45226 | Toll-Free: (888)-339-8003 | Phone: (513) 918-3344 | Fax: (513) 871-8623

Please complete this credit application in full to be considered for open account status. If the information supplied is incomplete or found to be incorrect, this may delay processing of the application and could affect prompt delivery of products or services.

Full Trade Name

Phone Number Fax Number

Website Tax ID Number

Billing Address

City State Zip

County

Shipping Address

City State Zip

How did you hear about Fulcrum Lifting™ LLC? Internet Search Website Referral Social Media

Salesman Referral

Type of Business In Business Since

Legal Form Under Which Business Operates LLC Corporation Partnership Proprietorship

If Division/Subsidiary, Name of Parent Company

In Business Since

Accounts Payable Contact

Phone Number Email

State Sales Tax Taxable Exempt ***If exempt, please submit re-sale certificate or other documentation.**

Owners/Officers

Name Title

Home Address Phone

City State Zip SSN

Name Title

Home Address Phone

City State Zip SSN

Name Title

Home Address Phone

City State Zip SSN

Financial Reference**Bank Reference**

Bank	<input type="text"/>	Branch	<input type="text"/>		
Street	<input type="text"/>	Account Number	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>
Contact Name	<input type="text"/>	Phone Number	<input type="text"/>		

Trade References

Company Name	<input type="text"/>	Account Number	<input type="text"/>				
Address	<input type="text"/>						
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>	Fax	<input type="text"/>
Phone Number	<input type="text"/>	Email	<input type="text"/>				

Company Name	<input type="text"/>	Account Number	<input type="text"/>				
Address	<input type="text"/>						
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>	Fax	<input type="text"/>
Phone Number	<input type="text"/>	Email	<input type="text"/>				

Company Name	<input type="text"/>	Account Number	<input type="text"/>				
Address	<input type="text"/>						
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>	Fax	<input type="text"/>
Phone Number	<input type="text"/>	Email	<input type="text"/>				

Company Name	<input type="text"/>	Account Number	<input type="text"/>				
Address	<input type="text"/>						
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>	Fax	<input type="text"/>
Phone Number	<input type="text"/>	Email	<input type="text"/>				

AGREEMENT

I, the applicant, certifies that the information contained herein is true and correct, and further authorizes Fulcrum Lifting™ LLC to investigate my credit record as submitted on this application. I further authorize the financial institutions and creditors listed on this application to release necessary information to Fulcrum Lifting™ LLC for the purpose of establishing credit for my company.

Applicant agrees that if credit is extended, all credit and sales made shall be subject to the following:

1. Applicant agrees to pay the full amount of the invoice(s) as specified on each invoice. Our standard terms are net/30 days.
2. In the event of default, customer agrees to pay all collection agency fees and/or attorney fees, in addition to late fees of 1.5% per month (18% per annum).
3. Seller reserves the right to change the terms of the account, to limit the amount of credit extended, or terminate the account in the event of default.
4. Seller reserves the right to charge a re-stocking fee on material returned for credit.

I certify that I am an officer of Applicant and that I agree to the above conditions.

Signature	<input type="text"/>	Date	<input type="text"/>
Print Name	<input type="text"/>	Title	<input type="text"/>

****Please submit completed form to Cindy Lightner - clightner@fulcruumlifting.com****