

**Michael Makowski, Inc.**

643 Conchester Hwy \* P.O. Box 99 \* Concordville \* PA 19331

Phone 610-459-2528 \* Fax 610-558-4900

**CREDIT APPLICATION**

DATE \_\_\_\_\_ MAX CREDIT NEEDS PER MONTH \_\_\_\_\_

FIRM NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ P.O. BOX # \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_ FAX \_\_\_\_\_ CELL \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ YEAR ESTABLISHED \_\_\_\_\_

FEDERAL I.D. # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

**THIS SECTION MUST BE COMPLETED FOR CREDIT CONSIDERATION**

INDIVIDUAL: Name \_\_\_\_\_ CORPORATION \_\_\_\_\_

Home Address \_\_\_\_\_ President \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Vice President \_\_\_\_\_

Home Phone \_\_\_\_\_ Secretary \_\_\_\_\_

Drivers License # \_\_\_\_\_ State \_\_\_\_\_ E-Mail \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_ EXP \_\_\_/\_\_\_ V-CODE \_\_\_\_\_

IF NON-TAXABLE GOVERNMENT AGENCY CHECK HERE \_\_\_\_\_ Taxable? No \_\_\_\_\_ Yes \_\_\_\_\_ Exempt # \_\_\_\_\_

OTHER (Please Explain) \_\_\_\_\_

IF YES, SIGNED FORM MUST ACCOMPANY THIS APPLICATION

BANK (business only) NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_

PLEASE LIST FOUR (4) CURRENT SUPPLIERS FOR REFERENCES:

1) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

2) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

3) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

4) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

HAS THIS APPLICANT OR ANY OF ITS PRINCIPALS EVER FILED A VOLUNTARY PETITION IN BANKRUPTCY? YES \_\_\_ NO \_\_\_  
HAS A TAX LIEN, UNSATISFIED JUDGEMENT OR CIVIL SUIT BEEN FILED AGAINST APPLICANT OR ANY PRINCIPAL WITHIN THE LAST SIX (6) YEARS?  
YES \_\_\_ NO \_\_\_

*IN CONSIDERATION FOR CREDIT BEING EXTENDED, I OR WE ACKNOWLEDGE AND AGREE TO THE FOLLOWING: (1) PAYMENT IS JOINTLY, SEVERALLY AND UNCONDITIONALLY GUARANTEED WITHIN 30 DAYS OF DATE OF DELIVERY; (2) ANY CHARGES UNPAID AFTER THE ABOVE 30 DAYS ARE TO BE INCREASED BY 1.5 % PER MONTH; (3) ANY CHARGES STILL OUTSTANDING AFTER 90 DAYS FROM DATE OF DELIVERY ARE SUBJECT TO COLLECTION, AND ALL COLLECTION OR ARBITRATION EXPENSES, ATTORNEYS FEE'S AND COURT COSTS WILL BE BORNE BY THE PURCHASER; (4) TITLE TO ALL WORK SHALL REMAIN WITH THE CREDITOR UNTIL ALL INVOICES AND ADDITIONAL CHARGES HAVE BEEN PAID IN FULL; (5) ALL CLAIMS, REQUESTS FOR ADJUSTMENTS, OR NOTIFICATION OF ERRORS MUST BE MADE WITHIN THIRTY DAYS, OR CHARGES ARE CONSIDERED ACCEPTED; (6) THIS AGREEMENT SHALL APPLY TO ALL CURRENT AND FUTURE CHARGES UNLESS REVOCATION IS RECEIVED BY REGISTERED MAIL; (7) CREDIT PRIVILEGES MAY BE WITHDRAWN AT ANYTIME WITHOUT INVALIDATING THE TERMS OF THIS AGREEMENT.*

FIRM NAME \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_