

# BondCote Corporation

## Trade Credit Application

509 Burgis Avenue  
 PO Box 729  
 Pulaski, VA 24301

Phone (540) 980-2640  
 Fax (540) 980-4210

**Please type or print clearly.**

Full Legal Name _____	Doing Business As _____
Billing Address _____	Shipping/Street Address _____
City _____ State _____	City _____ State _____
County _____ Zip _____	County _____ Zip _____
Phone (____) _____	Fax (____) _____

Credit Limit Desired \$ \_\_\_\_\_  
 Are Your Sales and/or Use Tax Exempt? \_\_\_\_ Yes \_\_\_\_ No **If yes, please return a tax exemption certificate with application.**

**FORM OF BUSINESS**

( ) Individual  
 ( ) Partnership  
 ( ) Corporation State of Incorporation \_\_\_\_\_  
 ( ) Division of \_\_\_\_\_  
 ( ) Subsidiary of \_\_\_\_\_  
 Federal ID Number \_\_\_\_\_

Type of Business \_\_\_\_\_  
 Years in Business \_\_\_\_\_ Year Incorporated \_\_\_\_\_  
 Accounts Payable Contact \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_\_ Extension \_\_\_\_\_  
 Purchasing Agent \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_\_ Extension \_\_\_\_\_  
 Purchase Orders Required? \_\_\_\_ Yes \_\_\_\_ No

Owner/Officer \_\_\_\_\_  
 Title \_\_\_\_\_ SSN \* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Owner/Officer \_\_\_\_\_  
 Title \_\_\_\_\_ SSN \* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(\* For individual or partnership, Social Security Number and home address required)

**BANK REFERENCE**

1. \_\_\_\_\_  

Name	Location	Phone Number	Account Number
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**TRADE REFERENCES** - List 3 or more verifiable references

1.	_____	_____	_____
	Name	Location	Phone Number
			Account Number
2.	_____	_____	_____
	Name	Location	Phone Number
			Account Number
3.	_____	_____	_____
	Name	Location	Phone Number
			Account Number
4.	_____	_____	_____
	Name	Location	Phone Number
			Account Number

A CURRENT FINANCIAL STATEMENT MAY BE REQUESTED FOR LARGE ORDERS.

The undersigned has given the above information for the purpose of obtaining credit and represents that said information is accurate and complete. BondCote Corp. is hereby authorized to investigate the information, trade references, bank references and other data obtained from us or any other source pertaining to our financial responsibility. The undersigned agrees to pay for such materials and/or services within agreed billing terms. The undersigned understands that a service charge of 1 1/2% is charged each month for the past due balances unpaid. In the event of default, the undersigned agrees to pay reasonable collection fees and other costs incurred in collection. The applicant agrees that any suit, action or proceeding arising out of amounts due to BondCote Corp. may be instituted against the applicant in the Circuit Court of Pulaski County, Virginia or in the United States District Court for the Western District of Virginia. This agreement shall remain in effect as long as the undersigned shall remain indebted to you. BondCote Corp. reserves the right to revoke the applicant's trade credit privileges at any time.

X \_\_\_\_\_  
 Authorized Signature Print or Type Name and Title Date

X \_\_\_\_\_  
 Spouse or Partner Signature Print or Type Name and Title Date  
 for Individual or Partnership Business