



1517 Townline Road
Benton Harbor, Mi 49022
Phone: 269/925-3200 Fax: 269/925-8539
Attn.: Dean Driscoll
Email: ddriscoll@printek.com

CUSTOMER CREDIT APPLICATION

Company Name _____

Phone _____ Fax _____

Billing Address: _____

Date Established: _____ Annual Sales: _____

Accounts Payable Contact/Extension: _____

Your invoices will be transmitted electronically; please provide an email address:

_____ @ _____

Legal Organization: _____ Corporation _____ Partnership _____ Proprietorship

Name of Owner(s)/Title: _____

Tax ID _____

Is A Purchase Order Number Required For Payment? Yes or No

Bank Reference _____ Phone _____

Address _____ Fax _____

_____ Contact _____

Bank Acct Number _____

Authorization: _____

Trade References: ***Fax Numbers Are Essential To Process Application.****
(Do Not Include Lease or Transportation Companies)

Company _____ Phone _____

Address _____ Fax _____

_____ Contact _____

Company _____ Phone _____

Address _____ Fax _____

_____ Contact _____

Company _____ Phone _____

Address _____ Fax _____

_____ Contact _____

I understand that this credit application is for the sole use of Printek, Inc. All information supplied to us will be kept confidential. I also agree to the following: 1) if a line of credit is granted, we will abide by the ***net 30 credit terms extended by Printek*** and 2) if it should become necessary to use a collection agency or court of law to collect amounts due, we agree to pay all reasonable collection expenses.

Name/Title (Please Print)

Signature

Date

* Businesses outside of the US must provide at least two US trade references.