



Request for Credit

33 Sylvan Street, West Springfield, MA 01089 · Ph: (413) 733-7306 · Fax: (413) 739-5476

Legal Name of Business		
Trade Name of Business		
Business Street Address		
City	State	Zip

Proprietor, Partners of Corporate Officers (Please provide an alternate address where we may reach you.)

Name	1.	2.	3.
Title			
Address			
City, State, Zip			
Home Phone			
Cell Phone			
Email Address			

Legal Information

Type of Business <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship	Federal ID#
Incorporation Date	If subsidiary, name of parent company
Tax Exempt # (Please attach exemption certificate):	
Resale # (Please attach resale certificate):	

Contact Information

	Contact	Phone	Fax	Email
Accounts Payable				
Person Approving Payments (If different than above)				

Bank Information

Bank Name	Account #	
Contact	Phone	Fax
Address		
City	State	Zip

Trade References

Name	1.	2.	3.	4.
Contact				
Phone				
Account #				
Annual Sales Volume				
Address				
City				
State				
Zip				

Credit Information

Credit Line Requested	Purchase Orders Required <input type="checkbox"/> Yes <input type="checkbox"/> No
Listed in Dun & Bradstreet <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Please list Duns #

****Any financial statements submitted with this application will be kept strictly confidential. This application may be retained whether or not it is approved. Permission is herewith granted to obtain credit information from all listed references including my bank. All financial information submitted in support of this new account and credit application is true and complete in all respects. My account is subject to a late charge of 1.5% per month (18% per annum) on all invoices owing in excess of thirty (30) days from the date of the Invoice. Furthermore, I understand that my credit terms may be place on hold or be withdrawn if my account is past due and that any collection fees (including attorney fees) incurred by Northeast Security Solutions, Inc., which the parties hereby fix at 33 1/3% of any balance due plus court costs, will be borne by my account. By signing this credit application and using services of Northeast Security Solutions, Inc., I certify that I am authorized to make this request on behalf of this company, and it is agreed that all purchases will be paid in accordance with the terms and conditions.**

Authorized Officer (printed): _____

Title: _____

Authorized Officer's Signature: _____

Date: _____