Laurel Custom Grating, LLC



18 Mount Pleasant Road Scottdale, PA 15683 800-426-1983 * 724-887-8100 * 724-887-7723 (f)

CREDIT APPLICATION (PLEASE TYPE OR PRINT)

Novus* Company Nar	me:				
Mailing Address:				tate	_Zip
Shipping Address:		City_	S	tate	_Zip
Phone:	Fax:	Maxim	um Credit Line Applied	For:	
Kind of Business:		Year Est	tablished:Compan	y Tax I.E	D. #
Tax-Exempt? Yes	No If yes, include co	py of tax exempt certifica	nte.		
Actual Annual Sales:	Is Busines	s Incorporated? Yes	No If yes, State of Ir	corporat	ion.:
Officers/Owners:					
Accounts Payables Superv	risor/Controller:				
Is Product Being Resold?	Yes No If yes, Pr	oject Name:			
Project Address:					
*BANK: MUST BE FDI *A Separate listing is acc		T HAVE CREDIT REI	LATIONSHIP (IE: L.O	•	
Supplier / Vendor:	1	2	3	Бапк	
Address:					
City, State & Zip:					
Account Number:					
Contact:					
Phone:					
Fax:					
The above information is f application is made to investigation is made to investigate in the financial responsibility, ab a 1 ½ % monthly interest of reasonable attorney's fees, Signed by:	estigate the references pert oility and willingness to pa charge. In accordance with in case of suit for non-pay	aining to my/our credit at y invoices in accordance h terms granted, applicant ment of any past due am	nd financial responsibility with the terms of sale. At agrees to pay all reason ounts.	y. Appli All past di	cant's signature attests ue invoices are subject to s of collection, including
	Authorized Signature	Т	Title		Date

FINANCIAL STATEMENTS TO BE PROVIDED AS PART OF THE INFORMATION OF CREDIT APPLICATION. **EMAIL COMPLETED FORM & FINANCIAL STATEMENTS TO:**accounting@mlpcompanies.com or

Mail To: Laurel Custom Grating, LLC 18 Mt Pleasant Rd Scottdale, PA 15683 Attn: Accounting