APPLICATION FOR CREDIT



Marvair, Inc. P.O. Box 400 • Cordele, Georgia 31010-0400 Phone (229) 273-3636

Date							
Company Name or Individual							
Street Address							
City		State		Zip Code			
Billing Address		Years at Present Address					
Phone Number			Fax Number				
Corporation Date Inc		Date Incorporated	Partnership				
Where Incorporated							
Principals of Company:			D & B Number				
Owner			President				
Vice President		Secretary					
Treasurer			Accounts Payable Email				
Is company tax exempt? (If yes, please attach copy of certificate)							
Trade F	rade References:						
1.	Name						
	Address		City,	State			
	Phone		Fax				
	Email						
2.	Name						
	Address		City,	State			
	Phone		Fax				
	Email						
3.	Name						
	Address		City,	State			
	Phone		Fax				
	Email						

I do hereby grant Marvair[®], Inc. permission to investigate and solicit information regarding the above-named company by obtaining data from a credit reporting agency and/ or other sources. I the undersigned, being an authorized agent of the entity listed above as the applicant for the extension of commercial credit, understand the stated terms and conditions of sale and agree to pay all invoices received within the terms. I also agree to pay interest of 1.5% per month, each and every month, on the past due unpaid balance, until the entire balance is paid in full. I also agree to pay all collection or legal fees incurred by Marvair as a result of non-payment. Marvair reserves the right at all times to limit or terminate credit terms.

Information given by

FOR MARVAIR USE ONLY							
Credit Approved	Terms	Date					
Signed		_ Title					
Brand Portfolio:							

Eubank

Marvair^{*}



