



# APPLICATION FOR CREDIT

FIRM NAME: \_\_\_\_\_

TRADE NAME: (If different than firm name) \_\_\_\_\_

STREET ADDRESS: (Not P.O. Box) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

OWNERSHIP: INDIVIDUAL \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_

FED. TAX NO.: \_\_\_\_\_ # OF EMPLOYEES: \_\_\_\_\_

DATE BUSINESS STARTED: \_\_\_\_\_ EFFECTIVE DATE OF CURRENT OWNERSHIP: \_\_\_\_\_

ESTIMATED ANNUAL SALES \$: \_\_\_\_\_

ESTIMATED ANNUAL PURCHASES FROM SINCLAIR & RUSH: \$ \_\_\_\_\_

### ACCOUNTING INFORMATION:

ACCOUNTS PAYABLE CONTACT: \_\_\_\_\_

ACCOUNTS PAYABLE E-MAIL (INVOICES SENT VIA E-MAIL): \_\_\_\_\_

### TRADE REFERENCES (Four Required)

NAME: \_\_\_\_\_  
STREET: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME: \_\_\_\_\_  
STREET: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME: \_\_\_\_\_  
STREET: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME: \_\_\_\_\_  
STREET: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Sinclair & Rush, Inc. extends net 30 terms to those accounts that have been granted open credit. In the event Sinclair & Rush, Inc. incurs collection cost or is required to institute suit to collect any amount due under this agreement or any portion thereof, the Company applying for credit agrees to pay such additional collection costs, charges, and expenses, including reasonable attorney fees incurred by Sinclair & Rush, Inc.

X \_\_\_\_\_ Date \_\_\_\_\_  
Authorized Signature/Title (required)



Sinclair & Rush, Inc.

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