



9216 Grand Ave S Bloomington, MN 55420

Net 30 Credit Application

Applicant				
Type of Business	Corporation	Proprietorship	Partnership	Other
Company			Fed ID or SSN	
Date		Prior Names		
Shipping Address				
Billing check if same as shipping				
Telephone			Fax	

Shipping Confirmation			
Contact		Phone	
Email Address		Do you require Purchase Orders?	Yes No

Accounts Payable Information	
A/P Contact	Phone
Email Address	Fax

Ownership Information – Minimum 1				
Name	Title	Ownership %	Home Address	Home Phone

Vendor References – Minimum 3				
Name	Account #	Address	Phone #	Fax or Email

Bank References – Minimum 1			
Bank #1			
Bank Name	Contact	Phone #	Fax or Email
Account No	Account Type	Bank Address	

Bank References – Minimum 1			
Bank #2			
Bank Name	Contact	Phone #	Fax or Email
Account No	Account Type	Bank Address	

Mortgage Holder/Landlord Information			
Name		Contact	
Address			Phone
Do you rent or own premises that the business occupies?	Rent	Own	Years at location
1. Has the company or any [officer, partner, member or owner] ever filed for bankruptcy? (if yes attach detail) Yes No			
2. Has your company or any company that any [office, partner, member or owner] been associated with as an [officer, partner, member or owner] ever had credit with us before? Yes No If yes under what business name?			
<p>By signing below, I certify that I have the authority to bind the company to this agreement, and that I agree to creditor's terms of sale of NET 30. I am requesting a credit amount of \$. I also agree and accept that the credit limit and credit terms may be changed or withdrawn at the sole discretion of the creditor. Creditor shall include creditor subsidiaries, related companies and assigns.</p> <p>The Information given herein is offered as part of a request by the applicant for an extension of credit for commercial business use. The information provided is represented by the applicant to be true, correct and complete. The Applicant authorizes Creditor to investigate all credit references and other sources pertaining to our credit and financial responsibility. The undersigned authorizes its banks and trade creditors to provide Creditor with complete information for the purpose of credit evaluation. The applicant further agrees to pay 100% of collection charges in the event of default, if the account is placed with a collection agency or attorney.</p>			
Signature		Title	Date
Print Name			

Personal Guarantee		
<p>In consideration of any credit extended, the undersigned will personally guarantee full and prompt payment of all indebtedness owed to NA Trading & Technology. This personal guarantee shall remain in force until its revocation is received by certified mail to the address and attention of NA Trading and Technology, Accounting Department, 9216 Grand Ave So, Bloomington, MN 55420. Revocation shall not affect indebtedness incurred prior to receipt of written notice. [Kentucky residents – if Guarantor is a resident of the Commonwealth of Kentucky, this guaranty shall be limited to amounts not exceeding \$10,000.00 for a duration of not more than 10 years from the date it is signed.]</p>		
Signature	Title	Date
Print Name		

Please include a Tax Exempt Certificate and a state issued sales tax license/permit

FAX THIS FORM TO: 952-888-6097 or email to accounting@natrading.com