

CREDIT APPLICATION

All fields on this credit application must be completed, in its entirety, as required information to determine credit worthiness. Any missing information may result in credit denial. Interest may be charged for all overdue accounts.

APPLICANT											
Full name of Applicant:											
Registered trading name(s):											
Federal ID #:											
Trading Address:					City:				State:	Post Code:	
Postal Address:					City:				State:	Post Code:	
Pho	ne Number:			Fax Number:	Web Ac			Web Addre	dress:		
BUSINESS FACTS											
(Please mark X)											
	e of Incorporati			ip Gole Hadel		nor.					
Туре	e of Business:				Autho	Authorized Capital:			Paid up Capital:		
		AUTH	HORIZATIO	ON FOR BANK	RELE	ASE O	F FINANCIAL	- INFORM	IATION		
AUTHORIZATION FOR BANK RELEASE OF FINANCIAL INFORMATION Name of Primary Trading Bank: Branch:											
Account Name:						Account Number:					
Account Officer:						Phone Number:					
Pref	erred payment	t method? 🔲 El	ectronic Funds	s Transfer	ie						
			[DIRECTORS / PA	ARTN	IERS / F	PROPRIETOR	RS			
		Full Name			Pos				Phone	Number	
1.											
2.											
3.											
An	nount of	credit rea	uested -	compulsory field	***	\$					
						DETA	ILS				
Chief Financial Officer								Accou	ınts Payat	ole	
Name:											
Phone Number:											
Fax Number:											
Ema	ail Address:										

6/29/2017 1 of 2



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TRADE REFERENCES (Major USA suppliers please within the last 12 months)									
	Name / Account #		Address	Phone Number Fax Number					
1.									
2.									
3.									
			DECLARATION						
It is agreed that: All information is accurate and true. Custom and Duty charges are always payable immediately. Terms are net 30 days. Interest and penalties on overdue balances will be charged where ROHLIG USA, LLC determine terms are not being reasonably adhered to. I/We have read and will comply with the Terms and Conditions of the credit agreement, which forms part of this document. For our Terms and Conditions of Service please visit our website at http://www.rohlig.com/company/terms-and-conditions.html I/We give consent to confirm and exchange credit information relating to this application from any source and acknowledge that the supplier may apply to a Credit Reporting Agency and such references supplied and authorized to give information necessary in assessing the application. Please note your facsimile signature will be treated as if original.									
Prin	t Name:								
Pos	ition:								
	nature:								
Date	×								
For	an on behalf of:								
Your ROHLIG USA, LLC Contact (please enter Sales contact)									
Please return the completed credit application to your sales representative or via fax to your local Rohlig office. For office locations please visit our website: http://www.rohlig.com/network.html									
For Internal Use Only									
Date sent to Finance:									
Credit Limit Approved									
Ву:				Date:					

Rohlig USA, LLC Finance Department

1601 Estes Avenue Elk Grove Village, Illinois, 60007

Tel: 224-563-3426 eFax: 630-597-9408

6/29/2017 2 of 2