



CREDIT APPLICATION

PLEASE RETURN TO: Pacific Metal Co. ATTN: Credit Dept. 10700 SW Manhasset Dr. Tualatin, OR 97062 Ph (503) 454-1051 Fax (503) 454-1065

Date: \_\_\_\_\_

Name of Company \_\_\_\_\_ Specific Type of Business \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ FAX \_\_\_\_\_

Credit Line Requesting \_\_\_\_\_ If purchases are for resale, please enclose tax exempt certificate

☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Co. ☐ Corporation ☐ Subsidiary of: \_\_\_\_\_

If Partnership, Limited Liability Co. or Corporation: Date Organized: \_\_\_\_\_ State: \_\_\_\_\_

OWNER'S, PRINCIPAL PARTNERS, OFFICERS', MEMBERS' AND MANAGERS' NAMES AND ADDRESSES:

Name \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_

Home Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_

Home Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_

Home Address \_\_\_\_\_

Name of purchasing agent \_\_\_\_\_ Phone: \_\_\_\_\_

Are purchase orders required? ☐ YES ☐ NO

What are your terms to your clients? \_\_\_\_\_

Have you ever done business with Pacific Metal Co. in the past? ☐ YES ☐ NO Which branch? \_\_\_\_\_

Bonding company generally used: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

BANKS USED:

Business Account At \_\_\_\_\_ Branch \_\_\_\_\_ Account No. \_\_\_\_\_

Address \_\_\_\_\_

Savings Account At \_\_\_\_\_ Branch \_\_\_\_\_ Account No. \_\_\_\_\_

Address \_\_\_\_\_

Other /Type \_\_\_\_\_

LIST OF CURRENT CREDITORS: (Attach an additional sheet if necessary)

Name Address City State Zip Phone

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

PORTLAND 10700 SW Manhasset Dr. Tualatin, OR 97062-8608 (503) 454-1051 FAX (503) 454-1065

SEATTLE 7416 S. 228th St. Kent, WA 98032-2930 (425) 251-6100 FAX (425) 251-0590

BOISE 10950 Executive Drive Boise, ID 83713-8940 (208) 323-8045 FAX (208) 322-6453

SPOKANE N 2206 Dollar Road Spokane, WA 99212-1459 (509) 535-0326 FAX (509) 535-3520

EUGENE 920 S. Danebo Ave. Eugene, OR 97402-2797 (541) 485-1876 FAX (541) 485-8217

BILLINGS 1630 South 32nd St. West Billings, MT 59101 (406) 245-2210 FAX (406) 245-8589

— PLEASE COMPLETE AND SIGN —

BALANCE SHEET AS OF:

Date: \_\_\_\_\_

ASSETS:

LIABILITIES:

Cash			Accounts Payable		
Accounts Receivable (less reserve for doubtful accounts)			Mortgages Payable		
Inventory			Notes Payable		
Buildings - (Assessed Valuation)			Reserve for Taxes		
Land			Other		
Equipment & Fixtures ( after depreciation)			Capital Stock		
Delivery Equipment ( after depreciation)			Retained Earnings		
Other					
Total Assets			Total Liabilities		

**Individual Personal Guaranty**

I, (we) \_\_\_\_\_ for and in consideration of your extending credit, at our request, to \_\_\_\_\_ hereby personally guarantee to Pacific Metal Co.; the payment of any obligation of the above named company and, I (we) hereby agree to bind myself to pay you on demand any sum which may become due to you by the company whenever the company shall fail to pay the same. It is understood that this guarantee shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the company. This obligation shall cover the renewal of any claims guaranteed by this instrument or extensions of payment thereof. I (we) authorize you to request and obtain one or more credit reports about us from one or more credit reporting agencies for the purposes of considering this application, reviewing or collecting any credit extended to the company or to us or for any other present or future business purpose. This Guaranty is subject to the terms of this Agreement as set forth above, including, but not limited to, terms of payment, jurisdiction, venue and governing law provisions.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

**Agreement:**

I (we) certify that this information is true and correct and I (we) agree that this application may be referred to a credit reporting bureau for verification of the information provided and if credit is extended, I (we) further agree that such extension of credit shall be subject to the following terms and conditions:

1. I(we) shall pay the full amount of the invoice when due, which is defined as 30 days from invoice date unless otherwise specified. 1% discount for prompt payment is applicable if invoices are paid in full within 10 days of invoice date.
2. If payment in full is not received by Pacific Metal Co.; by the due date, a service charge of 1-1/2% per month (18% per annum), or the maximum allowable by law, whichever is lesser, shall run on the unpaid balance from said date until payment in full is made.
3. In the event that a delinquent account is placed in the hands of a licensed collector or an attorney for collection, or suit is instituted on this account, I (we) agree to pay, in addition to the amount of the delinquent amount and interest, court costs, collector's and / or attorney's fees.
4. I (we) acknowledge receipt of and agree to the Pacific Metal Co.; Terms and Conditions of Sale, as printed on packing lists and invoices.
5. This Agreement will be construed under the laws of the state of Oregon, without regard to the choice of law rules of that state.
6. Any action brought by either party for claims arising out of this Agreement shall be filed in the appropriate court located in the state of Oregon, county of Washington.

Agreement accepted for: \_\_\_\_\_

COMPANY NAME

Authorized Agent: \_\_\_\_\_

SIGNATURE

Title: \_\_\_\_\_

FOR OFFICE USE ONLY

Credit Line \_\_\_\_\_

Approved By \_\_\_\_\_

Date \_\_\_\_\_