

921 Thomas Ave SW Renton, WA 98057 800.559.5065 local: 253.867.0334

fax: 253.867.0387

 ${\it email:}\ orders@oliver machinery.net$ 

www.olivermachinery.net

Applicant/Company Name:	
Other Trade Names:	
☐ Headquarters ☐ Branch	
Mailing Address:	Nature of Company
	FEIN:
Contact Person:	Years in Business:
Position:	Corporation
Telephone:	Partnership
Facsimile:	Sole Proprietor
E-mail:	Partnership
Billing Address (if different from mailing address):	Bank Information:
	Bank Name:
	Branch:
	Street Address:
If multiple locations, should all invoices go to this address?	City: State:
Yes No	Zip:
	Account Manager:
	Telephone:
	Fax Number :
	Account Number(s):



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					7 tii pu	iges must be	completed for consideration
Rating by Duns ar	nd Bradstreet						
☐ No	Yes	Rating		Duns #		_	
Account Informati	ion						
Requirements		U.S. Dollars	U.S. Dollars		<u>Is Organ</u>	ization sales	s tax exempt?
Catimated Monthly Du	rahaaaa				No	→ Sales Ta	ax Applies
Estimated Monthly Pu	ICHASES					→ Quote	
Credit Limit Desired					(if yes, provide sales exempt certificate)		
					<u> </u>	<del></del>	
Organization Infor	mation						
Has the company bee	n in business les	ss than 5 years?	? [	Yes, Y	ear		No, Year
			_				
Officers and Princ	ipal Owners of				rantors*	Call Dhan	a Ni wash a r
Name & Title		Social S	security	Number		Cell Phone	e Number
Home Address		Email				Signature	& Date
Name & Title		Social S	Security	Number		Cell Phone	e Number
Ll Adduses		Fmail				Circa et une	0.0-1-
Home Address		Email				Signature	& Date
		- 1					
Name & Title		Social S	Security	/ Number		Cell Phone	e Number
Home Address		Email				Signature	& Date

<sup>\*</sup> Personal Guarantors attests to financial responsibility, ability and willingness to pay our invoices in accordance with our terms.



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Trade References (or attach a listing)					
Organization :		Contact Name :			
Telephone:		Fax:			
Address:					
City:	State :		Zip Code :		
Credit Limit :	Terms :		Current Aging :		
Length of Business Relationship :			atisfaction:		
Organization :	ation :		Contact Name :		
Telephone :		Fax:			
Address :					
City:	State:		Zip Code :		
Credit Limit :	Terms :		Current Aging :		
Length of Business Relationship :					
Length of Business (Celationship).		Overall Satisfaction :			
Organization :		Contact Name :			
Telephone:		Fax:			
Address:		1			
Addition .					
City:	State :		Zip Code :		
Credit Limit :	Terms :		Current Aging :		
Length of Business Relationship :		Overall Sa	tisfaction :		



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Trade References (continued)					
Organization :		Contact Name :			
Telephone:		Fax:			
Address:					
City:	State :		Zip Code :		
Credit Limit :	Terms :		Current Aging :		
Length of Business Relationship :			itisfaction:		
- J					
Organization :	zation :		Contact Name :		
Telephone:		Fax:			
Address:					
City:	State :		Zip Code :		
Credit Limit :	Terms :		Current Aging :		
Length of Business Relationship :			Satisfaction :		
Zongur of Buomoco Horationionip :		T O TOTAL OA	norderion :		
Organization :		Contact Name :			
Telephone:		Fax:			
Address:					
City:	State :		Zip Code :		
Credit Limit :	Terms :		Current Aging :		
Length of Business Relationship :		Overall Sa	tisfaction:		



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All pages must be completed for consideration

with Oliver Machinery Company. ("Oliver") The undersigned understands that Oliver is relying on the information provided herein in deciding to grant or continue credit. The undersigned represents and warrants that the information provided is true and complete and that Oliver may consider it as continuing to be true and correct until a written notice of change is given to Oliver by the undersigned. Oliver is authorized to make all inquiries it deems necessary to verify the accuracy of the statements made herein to determine the undersigned's creditworthiness. If any order exceeds the credit limit established by Oliver, Oliver will require a down payment be made prior to processing the order. It is specifically understood that all billing accounts receivables and credit functions are processed by Oliver Machinery Co. in King County, Washington. Consequently, it is understood that any suit or proceeding by either party shall take place in King County, Washington at the option of Oliver Machinery Co. The undersigned understands that it is waiving its right to litigate outside of King County, Washington. It is understood by signing this application the undersigned is acknowledging and accepting that a service charge will be added to past due invoices each month in the amount of 1.5% (annual rate 18.0%). The

undersigned agrees to pay all costs of collection, including attorney's fees. Oliver reserves the right to withdraw or alter credit immediately, or not extend credit to the undersigned, in its sole discretion at any time. By submitting this Application, weather signed or unsigned, the undersigned agrees to the terms

The information contained in this application is provided for the purpose of obtaining or maintaining credit

Authorized Signature:

Name:

Date:

The Process:

Complete credit application form along with attachments

Fax to 253.867.0387 or email to info@olivermachinery.com

Oliver Machinery reviews and assesses request

When the application is successful, an Agreement may be entered into between the parties. This will contain all the trading terms and conditions relevant to the applicant based on the information provided in

the application.

and conditions contained herein.