



L & A PLASTIC MOLDING

A Division of Loritz & Associates, Inc.

CREDIT APPLICATION

CUSTOMER NAME _____

CORPORATION STATE _____

ADDRESS _____

PROPRIETORSHIP

PARTNERSHIP

STATE _____ ZIP _____

DATE ESTABLISHED _____

PHONE(____) _____ FAX(____) _____

TYPE OF BUSINESS _____

PRESIDENT _____

AP EMAIL _____

VP/FINANCE _____

TREASURER _____

TRADE REFERENCES:

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

STATE _____ ZIP _____

STATE _____ ZIP _____

PHONE(____) _____ FAX(____) _____

PHONE(____) _____ FAX(____) _____

E-MAIL _____

E-MAIL _____

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

STATE _____ ZIP _____

STATE _____ ZIP _____

PHONE(____) _____ FAX(____) _____

PHONE(____) _____ FAX(____) _____

E-MAIL _____

E-MAIL _____

BANK REFERENCE:

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

STATE _____ ZIP _____

STATE _____ ZIP _____

PHONE(____) _____ FAX(____) _____

PHONE(____) _____ FAX(____) _____

CONTACT _____

CONTACT _____

EMAIL _____

EMAIL _____

ACCOUNT # _____

ACCOUNT # _____

RESALE # _____

The information hereon is submitted to L&A for the purpose of obtaining credit. The undersigned hereby authorizes L&A and its agents to disclose this information in confidence to others, in order to facilitate the establishment of a credit account. If credit is extended based upon these representations, I/we agree to pay any obligations due in accordance with the terms of sale. Unless paid within these terms of sale, said amounts will be considered past due and subject to late charges of 1 1/2% per month. We further agree to pay reasonable attorney fees and any court costs in the event that suit is instituted to collect monies on this account.

Authorized Signature

Name

Title

Date