



Spray-Lock, Inc.
5959 Shallowford Rd. Suite 405
Chattanooga, TN 37421
tel. 423.305.6151
fax. 423.305.6150
www.spraylock.com

Credit Application

FOR OFFICIAL USE ONLY: All information will be held in strict confidence. Please type or print legibly. The process of reviewing this application will take about one week. Any jobs you receive before approval will be on a prepaid basis.

NAME OF BUSINESS: _____

Corporation Sole Proprietor Partnership Number of Years in Business: _____ Year Established: _____

BUSINESS TELEPHONE NUMBER: _____ FAX NUMBER: _____

Billing Address: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

Shipping Address: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

Accounts Payable E-mail: _____ @ _____ DUNS# _____

SALES TAX INFORMATION: If the Company is exempt from sales tax, a copy of the sales tax exempt certificate must be faxed along with completed credit application.

OWNERS/CORPORATE OFFICERS

Name: _____ Title: _____ Telephone# (_____) _____

Home Address: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

Name: _____ Title: _____ Telephone# (_____) _____

Home Address: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

Are purchase orders required for payment? Yes No

Purchasing Contact: _____ Telephone# (_____) _____

Billing Contact: _____ Telephone# (_____) _____

BANK REFERENCES

Bank: _____ Contact Name/Title: _____ Telephone# (_____) _____

Account Number: _____ Fax# (_____) _____

Bank: _____ Contact Name/Title: _____ Telephone# (_____) _____

Account Number: _____ Fax# (_____) _____

TRADE/VENDOR REFERENCES

Company: _____ Telephone# (_____) _____ Fax # (_____) _____

ADDRESS: _____ CITY: _____

COUNTY: _____ STATE: _____ ZIP: _____

Company: _____ Telephone# (_____) _____ Fax # (_____) _____

ADDRESS: _____ CITY: _____

COUNTY: _____ STATE: _____ ZIP: _____

REMIT PAYMENT TO: Spray-Lock, Inc. 5959 Shallowford Rd., Suite 405 Chattanooga, TN 37421

Please enter the name of your Spray-Lock Salesperson here:

TERMS & GUARANTEES: By submitting this application the entity identified above ("Customer") is applying to Spray-Lock and its subsidiaries (collectively, "Vendor") to obtain trade credit. By the signature below, the Undersigned represents that Customer is a valid business entity and that the Undersigned is an authorized representative of Customer with authority to enter into contractual agreements. On behalf of Customer, the undersigned certifies that all information provided in connection with this application is, and that all information subsequently provided to Vendor in connection with this application or the credit extended to Customer by Vendor shall be, true and correct in all material respects and the undersigned acknowledges that Vendor will be relying on such information with respect to making decisions regarding Customer's terms and credit. The undersigned hereby consents to Vendor obtaining information about the Customer from credit reporting agencies and other sources Vendor deems appropriate in considering this application and subsequently for purposes of updates, renewals, or extensions of credit granted as a result of this application or in reviewing or collecting Customer's account. Please refer to www.spraylock.com Customer Sale Order Terms and Conditions for a comprehensive statement of Spray-Lock's policies. Customer agrees to be bound by the terms and conditions for any and all sales transactions.

X Signed: _____ Title: _____ Date: _____