

DKS STEEL DOOR & FRAME SYSTEMS, INC.

2142 TUBEWAY AVENUE CITY OF COMMERCE, CA 90040

TEL: (323) 888-7763 ♦ FAX: (323) 888-0063

CREDIT APPLICATION

DATE: _____

Company Name

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Shipping Address

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

Type of Business: _____ Years at present location: _____

Type of Organization

- Private Corporation Partnership Public corporation
 Individual Other _____

Principals

Email address _____

NAME	POSITION	HOME ADDRESS	PHONE#

Bank Reference

Bank: _____ Account # _____

Address: _____ Phone # _____

Trade References

(Minimum of 3 With fax #)

NAME	ADDRESS	PHONE#	FAX#

Credit Limit Requested

NEED MONTHLY STATEMENT: YES NO

In making this application for credit, the customer agrees to pay all invoices within 30 days from date of invoice and to pay a service charge of 1.5% per month, which is an annual percentage rate of 18% on all overdue balances. In the event a suit is necessary to collect any amount, the customer agrees to pay the seller's reasonable attorney fees and costs including attorneys fees for appeal.

Signature _____

Title: _____ Date: _____

Office use only

Credit limit \$		Account #	
Date approved:		CR#	
Signature:		Discount:	
Reps Signature		Date	