

Tacoma Hydraulics, Inc. 405 Porter Way Unit A Milton, WA 98354

PH: (253)383-5761 FAX: (253)572-5881

Credit Application

| Company Name | | | Federal ID# | | | |
|--|--|---|---|--|--|--|
| Billing Address | | City | | Zip | | |
| Ship to Address | | City | State_ | Zip | | |
| A/P Contact | | Phone | Fax | (| | |
| Type of Organization | ☐ Corporation How long at | Partnership Previous Address | ☐ Individual | □ шс | | |
| | | (if less than 3 years) | | | | |
| Are you taxable? | Yes No In No, pl | ease include a copy of you | r reseller permit/exen | nption certificate | | |
| Do you require Purch | nase Orders? | No Would you prefer | your Invoices? | ailed E-mailed | | |
| Credit References | | Invoice E-mail ad | dress | | | |
| <u>Name</u> | <u>Addres</u> | <u>s</u> | <u>Phone</u> | <u>Fax</u> | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3. | | | | | | |
| Principal/Owner of C | ompany Addres | <u>s</u> | <u>Positior</u> | ļ. | | |
| 1 | | | | | | |
| | Pi | urchase Agreemen | it | | | |
| open account will remain remaining unpaid after such that it should reasonable attorney fees, Hydraulics, Inc. discretion continuation of credit shall | the property of Tacoma Hydraul ch date may incur a service char be necessary for Tacoma Hydra and any other reasonable cost in will be brought to the Pierce Co Il be at the sole discretion of Tac | chaser agrees to the terms of Ne ics, Inc. until the invoice has been ge of 1 ½ % per month of the hig ulics, Inc. to place my account into curred in the collection of this a unty Superior Court in Washingto oma Hydraulics, Inc. who may te ognized and the customer will be | n paid in full and all funds hest rate allowed on the un to a collection agency or att ccount. It is further agreed on State. All decisions with a rminate any credit availabil | ave cleared. Any amount paid balance until paid in full. orney, I agree to pay that any suit shall at Tacoma respect to the extension of ity at any time within its sole | | |
| Print Name | | Title | | | | |
| Signature | | Date | | | | |
| Internal Use Only | Approved & Entered by | | Date | 2 | | |
| CustomerID# | | Comments | | Pg 1 of 2 | | |



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Banking information

In order to obtain confidential information regarding your banking experience, we will require the information below. This letter of authorization will be sent to your bank along with a reference sheet. Without your authorization your bank will not release any banking information about your banking experience. Banking and Vendor experience is necessary to determine credit worthiness in order to open an account with open N30 terms.

| Bank Reference | | | | |
|--|--|--|----------------------------------|--|
| Name | Address | | Phone | Fax |
| 1 | | | | |
| Account # | | _ (Account number r | must be include | ed to avoid delays) |
| | rthiness, I authorize my bank t king experience including chec | | • | ith all necessary |
| Signature | | | | |
| Printed Name | | | | |
| Personal Guarantee | | | | |
| work performed or sales provi other entity, the undersigned | g extended by Tacoma Hydrau ded. Whether applicant be an guarantor or guarantors perso irther agreed that any suit shal | individual a propriet nally guarantees con | orship, a partn nplete paymen | ership, a corporation, or t of all monies due to |
| Signature | | | | |
| Date | | | | |