



BUSINESS CREDIT APPLICATION

Company Name _____
Contact Person _____
Street Address _____
City _____ State _____ Zip _____
Phone# _____ FAX# _____ e-mail _____
Type of Ownership: _____ Corporation _____ Partnership _____ Individual
Principal Owners _____ E. I. # _____

Application for Credit is hereby made and the following references given. This information will be held in strictest confidence and used only by your Credit Department.

Bank References

Name _____	Name _____
Contact Person _____	Contact Person _____
Address _____	Address _____
Phone # _____ FAX# _____	Phone# _____ FAX# _____
e-mail address _____	e-mail address _____
Checking Acct. No. _____	Checking Acct. No. _____
Savings Acct. No. _____	Savings Acct. No. _____
Loan Acct. No. _____	Loan Acct. No. _____

Business References

Name _____	Name _____
Address _____	Address _____
Phone# _____ FAX# _____	Phone# _____ FAX# _____
e-mail address _____	e-mail address _____
Name _____	Name _____
Address _____	Address _____
Phone# _____ FAX# _____	Phone# _____ FAX# _____
e-mail address _____	e-mail address _____
Credit Amount Requested: \$ _____	

Are you now or have you ever operated under the protection of the Bankruptcy Court? ___Yes ___No

Do you wish to receive a monthly account statement? ___Yes ___No

If applicable, sales tax will be charged, unless indicated below:

- ▶ Tax Exempt # _____
or
- ▶ Products we purchase are used in Delaware _____
or
- ▶ I will take responsibility for submitting sales tax as necessary _____

CREDIT POLICY

Purpose:

Should credit be granted by O. A. Newton, a credit limit will be set for your purchases.

Terms:

Standard Terms are net 15 days. Special terms or large equipment will require a down payment. Work performed under a contract agreement will have payment terms indicated in the proposal or contract, and invoices will be due upon receipt.

Finance Charges:

Finance Charges are computed by a periodic rate of 2% per month, which is an Annual Percentage Rate of 24% applied to the previous balance appearing on the statement, after deducting credits or payments, which apply to that balance.

Inactive Accounts:

Any account with no activity for a period of more than one year will be deleted from the Open Account List. If credit is desired after that point, it may be required that another Credit Application be completed.

Attorney's Fees / Expenses:

Customer agrees to pay O. A. Newton all of its costs and expenses, including attorney's fees and legal expenses, which O. A. Newton incurs in the event it places this account in the hands of an attorney for collection, through legal proceedings or otherwise.

Termination:

If customer fails to pay all charges when due under this Open Account Credit, O. A. Newton may declare the entire unpaid balance immediately due and payable and may terminate Customer's Open Account Credit for any additional purchases.

This application serves as authorization for O. A. Newton to obtain credit information from bank and trade references.

I (we) have reviewed O. A. Newton's Credit Policy, a copy of which is made a part of this credit application and I (we) understand the terms and conditions of the credit policy and agree to abide by them.

Signature _____ Print Name _____ Date _____

For any questions, please call 302-337-8211 or FAX 302-337-3780.

CREDIT DEPARTMENT ONLY		
Credit Amount Approved _____	Date _____	Signed _____