



**WHOLESALE DISTRIBUTORS OF ELECTRICAL
AND INDUSTRIAL SUPPLIES**
 925 South Main-P.O. Box 189
 Sikeston, Missouri 63801
 Telephone A/C 573-471-4432
 Fax A/C 573-471-3502
 Toll Free 800-455-4432

CREDIT APPLICATION

CUSTOMER	NAME _____				
	SHIPPING ADDRESS _____	CITY _____	STATE _____	ZIP _____	
	BILLING ADDRESS _____	CITY _____	STATE _____	ZIP _____	
	TELEPHONE NUMBER _____	FAX NUMBER _____			
BUSINESS STRUCTURE	<input type="checkbox"/> CORPORATION	NUMBER EMPLOYEES _____	Name of Officers, Partners, Individuals President _____ Vice President _____ Secretary/Treasurer _____		
	<input type="checkbox"/> PARTNERHIP				IN BUSINESS SINCE _____
	<input type="checkbox"/> PROPRIETORSHIP				
TRADE REFERENCES	FIRM NAME _____		ADDRESS _____		PHONE _____
	1				
	FIRM NAME _____		ADDRESS _____		PHONE _____
	2				
	FIRM NAME _____		ADDRESS _____		PHONE _____
3					
FIRM NAME _____		ADDRESS _____		PHONE _____	
4					
BANK REFERENCE	BANK WITH _____ CITY _____ STATE _____				
	CHECKING ACCOUNT NO. _____		PHONE NO. _____		
SALES TAX	(If "No", please complete sales tax exemption on reverse side)				
SALES TAX TO BE CHARGED: YES _____ NO _____					
PURCHASE ORDER	P.O. REQUIRED: YES _____ NO _____ (If "No" name of person) _____				

CREDIT POLICY

1. If the past due invoices remain unpaid for a period of another thirty (30) days (that is a total of (60) days), the account will be placed on credit hold until the past due account balance is paid off.
2. A finance charge of 1.5% will be assessed against those invoices which remain open beyond thirty (30) days terms, or \$5.50 minimum charge, which ever is greater.
3. Each payment received for an account which is on credit hold will be applied to the unpaid finance charges and then to the invoices specified on the remittance advice.
4. DeCota Electrical Supply Inc. reserves the right to withdraw your line of credit without advance notification.
5. If this account is turned over to a collection agency or attorney for collection, applicant agrees to pay all costs for collection and filing fees.

We have read and agree to the above terms and conditions.

Signed: _____ Date: _____

Name (Print): _____ Position: _____