Remit to: P.O. Box 11216, Fresno, CA 93772
2531 E. Jensen Ave Fresno, CA 93706
Ph. (559) 485-2658
counter@frontierfastener.com

CREDIT APPLICATION

BILLING ADDRESS:	**SHIPPING ADDRESS:**
COMPANY NAME	COMPANY NAME
MAILING ADDRESS	STREET ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
PHONE #	
EMAIL ADDRESS FOR INVOICES AND STATEMENTS	

GENERAL INFORMATION	
COMPANY COMPOSITION □ INDIVIDUAL □ CORPORATION □ PARTNERSHIP □ LLC	
YEARS COMPANY HAS BEEN IN BUSINESS	

NAMES AND ADDRESSES OF OWNERS, PARTNERS, OFFICERS	
NAME	TITLE
ADDRESS	CITY, STATE, ZIP
NAME	TITLE
ADDRESS	CITY, STATE, ZIP
NAME	TITLE
ADDRESS	CITY, STATE, ZIP

NEXT PAGE ➡

CREDIT REFERENCES	
NAME	EMAIL
ADDRESS	CITY, STATE, ZIP
NAME	EMAIL
ADDRESS	CITY, STATE, ZIP
NAME	EMAIL
ADDRESS	CITY, STATE, ZIP

BANK REFERENCE

BANK NAME	ACCOUNT #
ADDRESS	CITY, STATE, ZIP

Credit limit requested: $ _____

IF THIS ACCOUNT WILL BE USED FOR RESALE PLEASE ATTACH A COMPLETED RESALE CERTIFICATE.

CREDIT TERMS: Net 30 days of invoice date. 2% service charge per month shall be charged on overdue balances.
Merchandise charged to this account remains the property of Frontier Fastener until account is paid in full.
All collection costs, attorney fees and court costs shall be paid by applicant.
Credit terms and limit may be cancelled or changed by creditor without notice.
Applicant authorizes creditor to contact and receive confidential information relevant to their account from all references.

Signature Title Date