

MONARCH PRECAST CONCRETE CORP.

425 NORTH DAUPHIN STREET
ALLENTOWN, PA 18109-2199

PH: (610) 435-6746 FAX: (610) 437-7133

CREDIT APPLICATION

COMPANY NAME _____
STREET ADDRESS _____
CITY AND STATE _____ ZIP _____
TELEPHONE NO. _____ FAX NO. _____

TYPE OF BUSINESS: CORPORATION () PARTNERSHIP () PROPRIETORSHIP () SUBSIDIARY ()

DATE FOUNDED ____/____/____ AT PRESENT LOCATION SINCE ____/____/____

PRINCIPALS (PARTNERS OR CORPORATE OFFICERS) _____

TRADE REFERENCES

1.) NAME _____ PHONE _____ FAX _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

2.) NAME _____ PHONE _____ FAX _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

3.) NAME _____ PHONE _____ FAX _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

4.) NAME _____ PHONE _____ FAX _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

5.) NAME _____ PHONE _____ FAX _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

BANK REFERENCE _____

ACCOUNTS PAYABLE CONTACT _____

SALES TAX APPLICABLE () EXEMPT () EXEMPTION NO. _____
(IF SALES TAX EXEMPT, A CURRENT EXEMPTION CERTIFICATION MUST BE ON FILE)

TERMS AND CONDITIONS

OUR TERMS ARE NET 30 DAYS FROM DATE OF INVOICE, A 2% PER MONTH SERVICE CHARGE WILL BE ADDED TO ALL PAST DUE BALANCES. THE APPLICANT AGREES TO THE TERMS AND CONDITIONS OF THIS APPLICATION.

SIGNATURE _____ TITLE _____ DATE ____/____/____

OFFICE USE ONLY

DATE ____/____/____ CREDIT LIMIT _____ APPROVED BY _____