

BUSINESS INFORMATION				
Legal entity name				DBA
Contact name	First, Last	Title	Email	
Company address (physical location)	Street, City, State, Zip			
Company address (mailing)	Street, City, State, Zip			
Company contact information	Phone	Fax	Website	
Are PO's required for purchases?	Yes	No	If yes, are verbal PO's OK?	Yes No <i>NOTE: Verbal PO's will be verified</i>
Business Type	Corp., State? _____	Partnership	Sole Proprietorship	Other
Federal Tax ID #:	D&B #:	Credit limit requested?		

STATE SALES TAX STATUS	
Exempt from Sales Tax?	No Yes If yes, attach a valid sales tax exemption certificate otherwise sales tax will be assessed.

PRINCIPALS, OWNERS AND/OR OFFICERS (attach extra sheet, if necessary)			
Person 1	First, Last	Title	SSN
Home address	Street, City, State, Zip		
Person 2	First, Last	Title	SSN
Home address	Street, City, State, Zip		
Person 3	First, Last	Title	SSN
Home address	Street, City, State, Zip		

BANK REFERENCE			
Primary Bank	Bank name	Branch name	Phone Fax
Address	Street, City, State, Zip		
Type of account(s):			
Account Name:			Account #
Bank Contact	First, Last	Phone	

TRADE REFERENCES				
Firm 1				Credit limit?
Address	Street, City, State, Zip			
Contact Name	First, Last	Title	Phone	Email
Firm 2				Credit limit?
Address	Street, City, State, Zip			
Contact Name	First, Last	Title	Phone	Email
Firm 3				Credit limit?
Address	Street, City, State, Zip			
Contact Name	First, Last	Title	Phone	Email

PRIOR BANKRUPTCY?

Has the Firm/Company/Applicant or any of its Principals, or Officers ever declared bankruptcy?	Yes	No
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If Yes, please explain:

Any misrepresentation in this application will be considered evidence of fraud, since this information is the basis for extending credit. As an inducement to grant credit to the applicant, the applicant and undersigned warrant that the above information and related financial information and disclosures are true and correct. By submitting this application you are authorizing IQ Fibers, LLC or its representatives to investigate the bank, trade and credit references, and Principals, Owners and Officers listed above.

In consideration for the extension of credit, applicant promises to pay IQ Fibers, LLC for all purchases within the terms and agrees to pay a monthly service charge of 1-1/2% per month (18% APR) on all past due balances. In the event any 3rd parties are employed to collect any outstanding monies owed by the applicant, the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned(s) represents they possess the authority to execute this credit agreement on behalf of the business.

Signature
Must be a Principal, Owner or Officer

Title

Printed Name

Date

Email completed form to: kara@iqfibersllc.com

OR

Mail completed form to:

IQ Fibers, LLC
c/o Credit Department
1000 W. Wiley Ave.
Bluffton, IN 46714