

# BUSINESS CREDIT APPLICATION

## COASTAL WELDING SUPPLY

CREDIT DEPARTMENT

PO BOX 3029

BEAUMONT, TEXAS 77704-3029

Ph. 409.981.7700 or email: [acctsreceivable@coastalws.com](mailto:acctsreceivable@coastalws.com)



Full Company Name			No. of Years in Business		No. of Years at Present Location	
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> DBA	Federal ID No.	P. O. Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone No.	Fax No.
Delivery Address			Billing Address			
City, State, Zip			City, State, Zip			

### Name of Owners, Principals, and Officers

Name	Title	SS#	Phone No.
Name	Title	SS#	Phone No.
Name	Title	SS#	Phone No.

### Trade References

Name	Address	Phone	Contact
Name	Address	Phone	Contact
Name	Address	Phone	Contact

Bank Reference	Bank Address		
Bank Phone No.	Contact	No of Years Affiliated	

All Charges to debtor's account are due and payable thirty (30) days from the date debtor purchases, leases, or rents the goods or services giving rise to the charge. A service charge of 1.5% per month (18% annual percentage rate) may be charged on all amounts that are thirty (30) days or more past due. Coastal Welding Supply, Inc. reserves the right to change any terms of this credit agreement from time to time, including the service charge rate, as it applies to the current and future balances in the account. Coastal Welding Supply, Inc. may at any time and in its sole discretion, decline to extend credit under this credit agreement for any future purchases, leases, or rents. Please visit [www.coastalws.com/terms-of-sale](http://www.coastalws.com/terms-of-sale), for Coastal Welding Supply's complete General Terms and Conditions.

Applicant's Signature:	Printed Name:	Date:
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*Applicant's signature attests financial responsibility and willingness to pay all charges in accordance with our terms.*

### Personal Guarantee

In consideration for credit extended, the undersigned contracts and guarantees to the faithful payment, when due, of all accounts of the company seeking credit for 5 years from the date of this application. The undersigned guarantor expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notice of default by the company seeking credit and all other notices the guarantor might be entitled to. Revocation of the guarantee shall be in writing and delivered by certified mail.

_____ Signature	_____ Date	_____ Signature	_____ Date
_____ Print		_____ Print	

<b>OFFICE USE ONLY</b>	<input type="checkbox"/> Cash Cylinder Account	<input type="checkbox"/> Charge Account	<input type="checkbox"/> 99yr Lease	CWS Branch: _____	Sales Rep: _____	Credit Limit \$ _____
Cylinders: <input type="checkbox"/> Lease <input type="checkbox"/>	Approved By: _____		Date: _____			

# Additional Information for Credit Applications and Divisions

For New Account, requested Credit Limit:

\_\_\_\_\_

If New Division, what is main account number:

\_\_\_\_\_

**Bill To Address:**

Street 1: \_\_\_\_\_  
Street 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Ship To Address:**

Street 1: \_\_\_\_\_  
Street 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Accounts Payable Contact Info**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Shipping Contact Info**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Electronic Invoicing Yes  No

If Yes, Email Address: \_\_\_\_\_

**Cylinder Rental PO or Paying with Credit Card**

PO Number: \_\_\_\_\_

Credit Card: \_\_\_\_\_

Special Billing Instructions:

Contract: Yes  No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BELOW SECTION FOR INTERNAL USE ONLY**

**For Accounts Receivable Only**

New Acct No: \_\_\_\_\_  
Branch: \_\_\_\_\_  
Territory: \_\_\_\_\_  
Tax Status: \_\_\_\_\_  
Exemption Certificate on file? \_\_\_\_\_  
Salesperson Assigned to Account \_\_\_\_\_  
Credit Code:   A    B    W  

**Contracts and Fees**

Master Customer: \_\_\_\_\_  
Usage Fees: \_\_\_\_\_  
Hazmat Fees: \_\_\_\_\_  
Delivery Fee: \_\_\_\_\_  
Surcharges: \_\_\_\_\_  
Pricing: \_\_\_\_\_

Verified by: \_\_\_\_\_

Date: \_\_\_\_\_