



# Application for New Account or Credit Terms

www.baersupply.com

COD or Credit Card accounts, please complete Sections 1 through 7 below. For credit terms, please complete ALL sections. A Personal Guaranty may be required to extend credit terms, if this should be requested we will contact you via U.S. mail. Note: Accounts with 1 year of inactivity will be removed and a new application will be required to reactivate. Please complete required fields, missing information will delay processing of application.

<b>Section 1 - Business Information</b>					
Date:	Account Number:	Completed by:			
Legal Name of Business:					
Legal Status (check one): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Individual					
Type of Business:				Years in Business:	
Business or Owner previously have an account with Baer Supply Company? <input type="checkbox"/> Yes <input type="checkbox"/> No				Account Number:	
Is property owned or rented (check one): <input type="checkbox"/> Own <input type="checkbox"/> Rent				Number of Employees:	
Federal Tax ID Number:			Social Security #:		
<b>Section 2 - Online Purchasing &amp; Email Notifications</b>					
Activate online purchasing through the Commercial Account at www.baersupply.com: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Receive email notifications: (Select option & enter email address) <input type="checkbox"/> Online Purchasing _____					
<input type="checkbox"/> Shipment Notificaton _____					
<input type="checkbox"/> Order Confirmation _____					
<b>Section 3 - Billing Information</b>			<b>Shipping Information</b>		
Street Address:			Street Address:		
County:			County:		
City:	State:	Zip:	City:	State:	Zip:
Phone: ( )	Fax: ( )		Phone: ( )	Fax: ( )	
Multiple Billing/Shipping Addresses - Please use a separate sheet to indicate					
Where is purchasing done (check one): <input type="checkbox"/> Billing Address <input type="checkbox"/> Shipping Address					
<b>Section 4 - Owner Information</b>					
Owner(s):		Phone: ( )	Fax: ( )		
Contact for Orders:		Phone: ( )	Fax: ( )		
Contact for Accounting:		Phone: ( )	Fax: ( )		
<b>Section 5 - Tax Exempt</b>					
Business Sales Tax Exempt: (check one) <input type="checkbox"/> Yes (If exempt, must attach copy of tax exempt certificate) <input type="checkbox"/> No					
Resale Tax Number: (Tax will be charged unless certificate is included)					
<b>Section 6 - Credit Card</b>					
Use credit card on file for ALL purchases? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Name on card:		Credit Card Number:		Exp. Date:	
<b>Section 7 - Bank Information</b>					
Bank Account #:		Bank Name:			
Street Address:		City:	State:	Zip:	
Phone: ( )		Fax: ( )			
Name of Bank Contact:					
<b>For Office Use Only</b>					
Sales Branch #:	Ship Branch #:	Sales ID:	Credit Rep.:	Industry Code:	
Ship Via Code:	Route Code:	Freight Code:	Handling Code:	Approved By:	

For Credit Terms, please complete Sections 8 - 11 and sign below

**Section 8 - Invoice/Statement Requirements**

Please check all items that apply:  PO Number  One(1) PO Number per invoice  Job Number/Name

Invoice options:  U.S. Mail  E-mail \_\_\_\_\_  Fax \_\_\_\_\_

Statement options: Do you require a monthly statement?  Yes  No

If Yes:  U.S. Mail  E-mail \_\_\_\_\_  Fax \_\_\_\_\_

May we ship the first order on your Credit Card?  Yes  No - OR - COD?  Yes  No

Visa  Discover  Master Card  American Express Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Section 9 - Business Trade Information**

Please list only active vendors, mininum 4 required - no credit card or COD accounts (\* Fax numbers will expedite the application process)

Vendor Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ \* Fax: ( ) \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ \* Fax: ( ) \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ \* Fax: ( ) \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ \* Fax: ( ) \_\_\_\_\_

**Section 10 - Monthly Credit Requirements**

Estimated monthly credit requirements from Baer Supply Company: \$ \_\_\_\_\_

I, (Print Name) \_\_\_\_\_, give permission to release information to Baer Supply Company and any other credit bureau or other investigative agency employed/contracted by Baer Supply Company for the purpose of establishing a line of credit. Any information released to Baer Supply Company will be strictly confidential.

Authorized Signature: \_\_\_\_\_

**Section 11 - Terms & Conditions for Credit Account**

Applicant applies to Baer Supply Company ("Baer Supply") for a commercial credit account and requests Baer Supply to extend credit in order to enable the purchase of merchandise for business or commercial purposes. In consideration of Baer Supply agreeing to extend credit to Applicant, Applicant states as follows:

1. Applicant represents and warrants that all credit information, including but not limited to, the information on the Application for credit is true and correct as of the date of this application.
2. Applicant agrees that within (5) business days of a material business change, Applicant will notify Baer Supply of any material adverse change in Applicant's financial condition, which changes shall include, but not limited to, Applicant's insolvency or bankruptcy, Applicant default under any credit agreement or the attachment of any tax lien or judgment to, or the attachment by any creditor of a substantial portion of Applicant assets.
3. Applicant represents and warrants that it is financially able to comply with all payment terms specified here or in any invoice from Baer Supply and such warranty shall be deemed remade each time Applicant accepts credit from Baer Supply.
4. Applicant warrants that all persons making or placing orders on its behalf have sufficient authority to do so. Further agreement is made to comply with all payment terms.
5. Applicant agrees to pay under the following terms (unless otherwise stated): 25th prox; payable in full by the 25th of the month following the invoice date. An account becomes past due after this date and is subject to a finance charge of 1.5% per month (\$1.00 minimum) to be repaid by the applicant.
6. Non compliance with the terms stated in (5) above may result in an account being relegated to COD terms. All orders are subject to approval by our accounting department. We reserve the right to hold orders or ship COD if our terms and conditions are not followed.
7. The fee for a check returned, unpaid for any reason, from a bank is minimum \$25.00 and will be repaid by the applicant when billed.
8. Applicant agrees that Baer Supply can charge or amend any terms of this agreement by advising the applicant. The applicant's continued use of the open credit account shall be considered acceptance of the changed terms.
9. The Applicant agrees to provide Baer Supply updated financial information upon request. In the event of an unfavorable credit report or nonpayment of any past due invoice, Baer Supply may terminate this agreement or withhold deliveries to Applicant without notice. Baer Supply's failure to pursue this course of actions shall not be a waiver of its rights outlined in this Agreement.
10. Applicant will pay all expenses, including but not limited to, attorneys' and collection agency fees incurred by Baer Supply Company in the enforcement of this Agreement and the collection of any charges due. Applicant agrees that any dispute regarding any of the transactions which may arise between the parties pursuant hereto may, at Baer's discretion, be heard in the State or Federal courts having jurisdiction in Lake County, Illinois.

(Company Name) \_\_\_\_\_ accepts the above Terms and Conditions.

(Print Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Date) \_\_\_\_\_

(Signature) \_\_\_\_\_