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1401 Hooksett Rd., Hooksett, NH 03106  
603.644.8787 Fax 603.644.8747

## Business Credit Application

### Name/Address

Last:	First:	Middle Initial:	Title	
Name of Business:			Tax I.D. Number	
Address:			Cell:	
City:	State:	Zip:	FAX :	Phone:

### Company Information

Type of Business:	In Business Since:			
Legal Form Under Which Business Operates:				
Corporation <input type="checkbox"/>		Partnership <input type="checkbox"/>		Proprietorship <input type="checkbox"/>
If Division/Subsidiary, Name of Parent Company:			In Business Since:	
Name of Company Principal Responsible for Business Transactions:			Title:	
Address:	City:	State:	Zip:	Phone:
Name of Company Principal Responsible for Business Transactions:			Title:	
Address:	City:	State:	Zip:	Phone:

### Bank References

Institution Name:	Institution Name:	Institution Name:	
Checking Account #:	Savings Account #:	Account #	
Address:	Address:	Address:	
Phone:	Phone:	Phone:	

### Trade References

Company:	Company:	Company:
Contact:	Contact:	Contact:
Address:	Address:	Address:
FAX :	FAX :	FAX :
Phone:	Phone:	Phone:
Account Open Since:	Account Open Since:	Account Open Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

**All applicants, please complete the following:**

Is your business tax exempt? \_\_\_\_\_

If you are a tax exempt business please attach a copy of your *Tax Exempt Certificate* with this application.

Will Purchase Orders be issued?      Yes              No

Individuals authorized to sign:

Name
Name
Name
Name

Contact name for Account Payables:

Name	Phone	Email
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- CREDIT LIMIT.** Your credit limit will be set by us when your application is approved and from time to time thereafter you may request a limit which we will review based upon available credit information. You agree not to permit the total amount owing to us to exceed your credit limit. In the event you exceed your credit limit, the excess shall become immediately due and payable at our option, to the extent permitted by applicable law and shall be subject to the terms of this Agreement.
- FINANCE CHARGE.** You agree to pay a FINANCE CHARGE for each monthly billing cycle. You will not have to pay a Finance Charge for a billing cycle if you make payments or receive credits before the Payment Due Date on your last billing statement, and they total at least the New Balance on that statement.
- DEFAULT.** If you fail to make any payment as agreed and continue not to make payments after receiving any notice that may be required by the law or your state, if you file for bankruptcy, or if you die, we have the right to demand immediate payment of the full unpaid balance on your Account, and suspend or terminate your privilege to charge new amounts to your Account without notice.
- COLLECTION COSTS.** Should we incur court costs in collecting past due amounts due on your Account, you will pay those costs, including reasonable attorney's fees as permitted by state law.
- RETURNED CHECK FEE.** Should we incur costs in collecting past due amounts due on your Account, you will pay those costs, including reasonable returned check fee for each such returned check to the extent permitted by applicable law.
- ALL RETURNS** are subject to a 15% handling charge, at our discretion.
- QUESTIONS.** If you have any billing or other inquiries about your Account, you can write to Wood's CRW Corp. at the address on your monthly billing statement or call **603-644-8787**. You understand that a telephone inquiry will not preserve your rights to dispute billing errors under federal and state law.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

By signing below, you also agree to all of the terms of this agreement as well as all terms and conditions of sales and rental charges and you acknowledge that you have read this agreement.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Title*