



9216 Grand Ave S Bloomington, MN 55420

# Net 30 Credit Application

Applicant				
Type of Business	<input type="checkbox"/> Corporation	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other
Company			Fed ID or SSN <i>Click to enter FEIN or SSN.</i>	
Date <i>Click to enter date</i>		Prior Names <i>Click or tap here to enter names</i>		
Shipping Address				
<i>Click / tap to enter shipping Address</i>		<i>Enter City</i>	<i>Enter State</i>	<i>Enter Zip</i>
Billing <input type="checkbox"/> check if same as shipping				
<i>Click / tap to enter Billing Address</i>		<i>Enter City</i>	<i>Enter State</i>	<i>Enter Zip</i>
Telephone <i>Click or tap here to enter Phone #</i>			Fax <i>Click or tap here to enter Fax #</i>	

Shipping Confirmation	
Contact <i>Click or tap here to enter Contact Name</i>	Phone <i>Click or tap here to enter Phone #</i>
Email Address <i>Click or tap here to enter email</i>	Do you require Purchase Orders? <input type="checkbox"/> Yes <input type="checkbox"/> No

Accounts Payable Information	
A/P Contact <i>Click or tap here to enter Contact Name</i>	Phone <i>Click or tap here to enter Phone #</i>
Email Address <i>Click or tap here to enter email</i>	Fax <i>Click or tap here to enter Fax #</i>

Ownership Information – Minimum 1				
Name	Title	Ownership %	Home Address	Home Phone
<i>Click/tap to enter name</i>	<i>Title</i>	<i>%</i>	<i>Address</i>	<i>Phone #</i>
<i>Click/tap to enter name</i>	<i>Title</i>	<i>%</i>	<i>Address</i>	<i>Phone #</i>
<i>Click/tap to enter name</i>	<i>Title</i>	<i>%</i>	<i>Address</i>	<i>Phone #</i>
<i>Click/tap to enter name</i>	<i>Title</i>	<i>%</i>	<i>Address</i>	<i>Phone #</i>

Vendor References – Minimum 3				
Name	Account #	Address	Phone #	Fax or Email
<i>Click/tap to enter name</i>	<i>Account</i>	<i>Address</i>	<i>Phone #</i>	<i>Fax/email</i>
<i>Click/tap to enter name</i>	<i>Account</i>	<i>Address</i>	<i>Phone #</i>	<i>Fax/email</i>
<i>Click/tap to enter name</i>	<i>Account</i>	<i>Address</i>	<i>Phone #</i>	<i>Fax/email</i>
<i>Click/tap to enter name</i>	<i>Account</i>	<i>Address</i>	<i>Phone #</i>	<i>Fax/email</i>

Bank References – Minimum 1			
Bank #1			
Bank Name <i>Click/tap to enter name</i>	Contact Contact	Phone # Phone #	Fax or Email Fax/email
Account No Account	Account Type Account Type	Bank Address Address	
Bank #2			

Bank References – Minimum 1			
Bank Name Click/tap to enter name	Contact Contact	Phone # Phone #	Fax or Email Fax/email
Account No Account	Account Type Account Type	Bank Address Address	

Mortgage Holder/Landlord Information		
Name Click/tap to enter Mortgage or Landlord Name	Contact Click/tap to enter Contact Name	
Address Click/tap to enter Address		Phone Enter Phone #
Do you rent or own premises that the business occupies <input type="checkbox"/> Rent <input type="checkbox"/> Own		Years at location Enter Years
1. Has the company or any [officer, partner, member or owner] ever filed for bankruptcy? (if yes attach detail) <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Has your company or any company that any [office, partner, member or owner] been associated with as an [officer, partner, member or owner] ever had credit with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes under what business name? Click or tap here to enter Business Name		
By signing below, I certify that I have the authority to bind the company to this agreement, and that I agree to creditor's terms of sale of NET 30. I am requesting a credit amount of \$ <a href="#">Click or tap here to enter dollar amount being requested</a> . I also agree and accept that the credit limit and credit terms may be changed or withdrawn at the sole discretion of the creditor. Creditor shall include creditor subsidiaries, related companies and assigns. The Information given herein is offered as part of a request by the applicant for an extension of credit for commercial business use. The information provided is represented by the applicant to be true, correct and complete. The Applicant authorizes Creditor to investigate all credit references and other sources pertaining to our credit and financial responsibility. The undersigned authorizes its banks and trade creditors to provide Creditor with complete information for the purpose of credit evaluation. The applicant further agrees to pay 100% of collection charges in the event of default, if the account is placed with a collection agency or attorney.		
Signature	Title Click to enter title	Date Click to enter date
Print Name Click or tap here to enter name		

Personal Guarantee		
In consideration of any credit extended, the undersigned will personally guarantee full and prompt payment of all indebtedness owed to NA Trading & Technology. This personal guarantee shall remain in force until its revocation is received by certified mail to the address and attention of NA Trading and Technology, Accounting Department, 9216 Grand Ave So, Bloomington, MN 55420. Revocation shall not affect indebtedness incurred prior to receipt of written notice. [Kentucky residents – if Guarantor is a resident of the Commonwealth of Kentucky, this guaranty shall be limited to amounts not exceeding \$10,000.00 for a duration of not more than 10 years from the date it is signed.]		
Signature	Title Click to enter title	Date Click to enter date
Print Name Click or tap here to enter name		

**Please include a Tax Exempt Certificate and a state issued sales tax license/permit  
FAX THIS FORM TO: 952-888-6097 or email to [accounting@natrading.com](mailto:accounting@natrading.com)**