



One Commerce Drive
Cranford, NJ 07016-1108
800.222.0510
Fax 800.634.5184
www.aslegal.com

APPLICATION FOR CHARGE ACCOUNT

Firm Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Person to Contact: _____

Name & Title: _____

Phone: _____

Nature of Business: _____

Fax#: _____

E-mail: _____

Sales volume per year: _____ Website address: _____

Number of years in business: _____ Dun & Bradstreet Rating: _____

☐ Corporation ☐ Partnership ☐ Individual

Name of Owner(s)/Officers(s): _____

Name and Address of Principal Bank: _____

Tel. No.: _____

Bank Officer: _____ Account Number: _____

Three (3) principal trade references:

(1)	Company Name: _____ Address: _____ City: _____ St: _____ Zip: _____ Nature of Business: _____	Contact: _____ Tel. No.: _____ Fax No.: _____ E-Mail: _____
(2)	Company Name: _____ Address: _____ City: _____ St: _____ Zip: _____ Nature of Business: _____	Contact: _____ Tel. No.: _____ Fax No.: _____ E-Mail: _____
(3)	Company Name: _____ Address: _____ City: _____ St: _____ Zip: _____ Nature of Business: _____	Contact: _____ Tel. No.: _____ Fax No.: _____ E-Mail: _____

STATEMENT OF POLICY

Orders from new accounts cannot be processed until this application has been fully completed and credit is approved.

PAYMENT AND CREDIT TERMS

Payment is due in full within thirty (30) days from date of invoice. A Time-Price Differential Charge equal to 1½% per month will be added to all outstanding balances after thirty (30) days.

Date: _____ Officer's/Owner's Signature: _____ Title: _____