

Industrial Ladder

& Supply Company, Incorporated

Established in 1975



Classic Service

Ladders - Scaffolding - Truck Equipment Installation

245 East Adele Court
Villa Park, Illinois 60181
www.industrialladder.com

Phone: 1-630-530-7580
Fax: 1-630-993-0795
Toll Free 1-800-833-0800

OPEN ACCOUNT CONTRACT - CREDIT APPLICATION

Accounts Receivable Department is located at our Villa Park, IL Corporate Headquarters

Please Complete, Sign, and Fax Application To 1-630-993-0795

We are very happy to present to you our open account contract. Over the past thirty one years we have extended credit to thousands of customers. Our relationship with these customers is the greatest asset this company has. With this foundation in mind, we wish to ask you three questions at this time.

1. Our terms are net 30 days. Will you be able to meet them? Yes No
2. Are you financially solvent? Yes No
3. Do you agree to tell us if you ever become unable to pay on time? Yes No

APPLICANT INFORMATION

COMPANY NAME: _____

TAX EXEMPT RESALE ****PLEASE PROVIDE A COPY OF TAX EXEMPT OR RESALE FORM****

TYPE OF OWNERSHIP: Corporation Partnership Sole Proprietor

NUMBER OF YEARS IN BUSINESS: _____ NUMBER OF EMPLOYEES: _____

BILLING ADDRESS: _____ PHONE: _____

CITY, STATE, ZIP: _____ FAX: _____

SHIPPING ADDRESS: _____ PHONE: _____

CITY, STATE, ZIP: _____ FAX: _____

ACCOUNTS PAYABLE CONTACT: _____ PHONE: _____

ACCOUNTS PAYABLE MANAGER: _____ PHONE: _____

PURCHASING MANAGER: _____ P.O. NUMBER REQUIRED?

YES NO

OWNER & TITLE: _____ CITY & STATE OF RESIDENCE: _____

OWNER & TITLE: _____ CITY & STATE OF RESIDENCE: _____

In the event that collection on the account is turned over to a collection agency or attorney, applicant agrees to pay for all costs of collection, including but not limited to: agency fees, court costs, service fees, and reasonable attorneys' fees incurred in the collection of this account whether or not suit is filed.

PRINTED OWNER OR OFFICER'S NAME: _____ SIGNATURE OF OWNER OR OFFICER: _____ DATE: _____

Chicago Baltimore-Washington Milwaukee Columbus Minneapolis Cincinnati Dallas-Ft. Worth Indianapolis

TRADE CREDIT REFERENCES

We are asking for information on companies that supply you with materials and services on an open account basis. **We require at least five references. Please provide the fax number to the credit department of your credit reference.** We require a minimum of three responses from your references. This information will remain confidential. Thank you!

Industrial Ladder & Supply Co., Inc.

PLEASE PRINT LEGIBLY

CREDIT REFERENCE #1

COMPANY NAME: _____

CITY & STATE: _____ PHONE: _____

CONTACT NAME: _____ CREDIT DEPARTMENT FAX: _____

CREDIT REFERENCE #2

COMPANY NAME: _____

CITY & STATE: _____ PHONE: _____

CONTACT NAME: _____ CREDIT DEPARTMENT FAX: _____

CREDIT REFERENCE #3

COMPANY NAME: _____

CITY & STATE: _____ PHONE: _____

CONTACT NAME: _____ CREDIT DEPARTMENT FAX: _____

CREDIT REFERENCE #4

COMPANY NAME: _____

CITY & STATE: _____ PHONE: _____

CONTACT NAME: _____ CREDIT DEPARTMENT FAX: _____

CREDIT REFERENCE #5

COMPANY NAME: _____

CITY & STATE: _____ PHONE: _____

CONTACT NAME: _____ CREDIT DEPARTMENT FAX: _____

Please complete the application and fax it to our corporate A/R Department at 1-630-993-0795. Thank you!