

1028 West Marine View Drive, Everett WA 98201  
Local (425) 339-2666  
Seattle (206) 522-3419  
Toll Free (800) 962-6723  
Fax (425) 258-2545  
www.dunlapindustrial.com



**CREDIT ACCOUNT APPLICATION**

**Please Type or Print Clearly and Provide All Requested Information**

Company Name: \_\_\_\_\_  
Address-1: \_\_\_\_\_  
Address-2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_

- Sole Proprietorship
- Partnership
- Corporation

Date Established: \_\_\_\_\_ At Current Location \_\_\_\_\_ Years  
Federal Tax ID No.: \_\_\_\_\_ WA Resale No.: \_\_\_\_\_  
All Resale  Some Resale

Parent Corporation or Proprietor Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name(s) & Title(s) of Officers or Partners: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Accounts Payable Information:**

Accounting Contact: \_\_\_\_\_  
\_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Ext: \_\_\_\_\_  
Billing Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Billing Email: \_\_\_\_\_

Purchase Orders Required?  Y  N  
Job Numbers Required?  Y  N  
Other? \_\_\_\_\_  
Preference(s) For Invoice Copies:  
Fax  Email

Billing Address (If Different From Company Address)  
Address-1 \_\_\_\_\_  
Address-2 \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_

App. Rcvd:	_____
Appvd Date:	_____
Cust. Code:	_____

**Bank Reference:**

Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_ Phone: \_\_\_\_\_  
Account No.: \_\_\_\_\_ Contact: \_\_\_\_\_

DIH.2018

**Trade References:** Please provide FAX phone number or e-mail contact. Current open credit, no utilities, freight, fuel or charge cards.

Company: \_\_\_\_\_  
Add-1: \_\_\_\_\_  
Add-2: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

Company: \_\_\_\_\_  
Add-1: \_\_\_\_\_  
Add-2: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

Company: \_\_\_\_\_  
Add-1: \_\_\_\_\_  
Add-2: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_ Zip: \_\_\_\_\_  
E-mail : \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

Company: \_\_\_\_\_  
Add-1: \_\_\_\_\_  
Add-2: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

Company: \_\_\_\_\_  
Add-1: \_\_\_\_\_  
Add-2: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

Company: \_\_\_\_\_  
Add-1: \_\_\_\_\_  
Add-2: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

**ALL PURCHASES ARE SUBJECT TO THE FOLLOWING TERMS:**

The undersigned hereby authorizes and consents to the contact or inquiry of any person, corporation or business of any kind regarding credit standing and the pursuit of financial information. This authorization is in no way limited to the information that has been provided herein. The undersigned indemnifies and holds harmless Dunlap Industrial Hardware from any liability connected with such contact. The undersigned acknowledges the understanding that all past due invoices (per invoice terms) are subject to a 1.67% finance charge per month (20.04% annually) with a minimum charge of \$1.00 . All past due accounts are subject to collection. The undersigned agrees to pay all costs associated to the collection of a past due balance (including finance charges). Collection costs may include, but not limited to collection agency fees, court cost and attorney fees.

Pursuant to RCW62A.9A.103. Buyer agrees that to secure payment of all obligations incurred under the terms of the credit agreement, Dunlap Industrial Hardware, shall retain title to the property and shall continue to have security interest in all property sold to the buyer for which an outstanding debt exists.

The undersigned has read the complete application and understands the the accuracy of the information provided hereon is the basis for the extension of credit and does certify that the information provided is accurate. Venue and jurisdiction for any suit based on this agreement shall be in SNOHOMISH COUNTY, WASHINGTON. The laws of The State of Washington shall control.

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

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Please Mail, FAX or E-mail**  
FAX: (425) 258-2545  
dunlapacct@gmail.com

DUNLAP INDUSTRIAL HARDWARE, INC  
1028 W MARINE VIEW DR  
EVERETT WA 98201