



TEL: 862-244-4430

BSI CONTROLS

FAX: 862-244-4431

BUCK SALES INC • 151 STATE ROUTE 10 E STE L102 • SUCCASUNNA NJ 07876

Website: <http://www.bucksales.com>

APPLICATION FOR CREDIT

Company Name:	
Address (1):	
Address (2):	
City:	
State:	
Zip:	

Organization: Sole proprietor [] Single LLC [] C-Corp [] S-Corp [] Partnership []
LLC-C [] LLC-S [] LLC-P []

Date Established: EIN: DUNS:

Please Attach your W-9 Form, ACH application (if applicable) and any tax-exempt certificates that may apply to your orders

CONTACTS:

Purchasing Manager

Name:			
Title			
Phone:		Extension:	
Fax:			
E-mail:			

Accounts Payable

Name:			
Title			
Phone:		Extension:	
Fax:			
E-mail:			

REFERENCES:

Bank Reference

Name:			
Contact:			
Title			
Phone:		Extension:	
Fax:			
E-mail:			
Account Number:			



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Trade References

Name:			
Contact:			
Title:			
Phone:		Extension:	
Fax:			
E-mail:			
Account Number:			

Name:			
Contact:			
Title:			
Phone:		Extension:	
Fax:			
E-mail:			
Account Number:			

Name:			
Contact:			
Title:			
Phone:		Extension:	
Fax:			
E-mail:			
Account Number:			

In the event this account shall be in default, and placed with an attorney for collection, then the undersigned authorizes the Company to pay all reasonable attorney fees and cost of collections.

Company Name:			
Signature:			
Printed Name:			
Title:			