



CREDIT APPLICATION

Experience, Trust, Service

3425 E. LOCUST ST.
DAVENPORT, IA 52803
800.BLAST.IT | 800.252.7848

FAX COMPLETED FORM TO
563.324.5792

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Entire form must be completed and signed (bottom of page 2) for consideration of open credit terms.

COMPANY INFORMATION

COMPANY NAME		FEDERAL ID#		
BILLING ADDRESS	CITY	STATE	ZIP	PHONE
SHIPPING ADDRESS	CITY	STATE	ZIP	PHONE
DATE COMPANY ESTABLISHED (MM/DD/YYYY)	OFFICER/OWNER			

ARE YOU A CORPORATION? YES NO
HAS THE COMPANY EVER FILED FOR BANKRUPTCY? YES NO

D&B D-U-N-S #

PARENT COMPANY NAME

BILLING ADDRESS	CITY	STATE	ZIP	PHONE
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CURRENT TRADE REFERENCES (PLEASE ATTACH OR FILL OUT BELOW)

1. NAME

CITY	STATE	ZIP	PHONE	FAX
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2. NAME

CITY	STATE	ZIP	PHONE	FAX
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3. NAME

CITY	STATE	ZIP	PHONE	FAX
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4. NAME

CITY	STATE	ZIP	PHONE	FAX
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5. NAME

CITY	STATE	ZIP	PHONE	FAX
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6. NAME

CITY	STATE	ZIP	PHONE	FAX
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BANK REFERENCE

BANK NAME		LOAN OFFICER			YEARS WITH BANK
ADDRESS	CITY	STATE	ZIP	PHONE	FAX

ACCOUNTS PAYABLE INFORMATION

PERSON(S) RESPONSIBLE FOR ACCOUNTS PAYABLE		TITLE
PERSON(S) RESPONSIBLE FOR SIGNING CHECKS		TITLE
ESTIMATED MAXIMUM CREDIT REQUIREMENT	ARE PURCHASE ORDER NUMBERS REQUIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO	

SALES TAX EXEMPTION INFORMATION

The following information is required for sales tax compliance:

Our company is NOT subject to sales tax in the state(s) of: _____

Our company is engaged as a registered Retailer or Wholesaler as it relates to products purchased from Marco, or products purchased from Marco are used directly in our Manufacturing process, or products purchased from Marco are used on a government project.

****Must forward a copy of your sales tax exemption certificate(s) with your completed credit application.****

Our company certifies that if any property so purchased, sales tax free, is used or consumed by us, as to make it subject to Sales or Use Tax, we will pay the tax due direct to the proper taxing authority.

ACKNOWLEDGEMENT - SIGN AND DATE

I understand the information provided on this form is to be used by Marco for the purpose of assigning or denying credit. This information is correct and true to the best of my knowledge. I hereby grant permission to Marco to verify the above bank and trade references.

I agree to Marco's terms of sale Net 30. I understand that a finance charge of 1.5% per month (18% per year), as well as all legal and collection fees will be assessed on all accounts sent to collections

Under penalty of perjury, I swear the information on this form is true and correct.

AUTHORIZED SIGNATURE	DATE (MM/DD/YYYY)
PRINT NAME	TITLE

CREDIT DEPARTMENT
PHONE: 800.801.8140
FAX: 563.324.5792

FOR MORE INFORMATION
800.BLAST.IT | 800.252.7848
SALES@MARCO.US
WWW.MARCO.US