

Feeney, Inc. Credit Application

Firm name: _____ Fed Tax ID No: _____

Proprietorship Corporation/LLC Partnership/LLP Government

Owner/Officer(s)

Name: _____ Address: _____

Name: _____ Address: _____

Business Profile

Type of business: _____ Date established: _____ Credit requested: \$ _____

Years at present location: _____ Purchase orders required? Yes No

Billing address _____

Seller's permit number: _____ Yes No

If for resale, your signed resale or tax exemption certificate must be sent to Feeney, Inc. before the sale is finalized so sales tax will not be charged.

AP contact: _____ Phone: _____ Fax: _____

Email: _____ Website: _____

Will accept invoices by: Fax Email

Shipping address: _____

Purchasing contact: _____ Title: _____

Phone: _____ Fax: _____

***** Once credit is approved, check payment/ACH is required to pay for all outstanding invoices. If you pay with a credit card on outstanding invoices, YOU WILL LOSE YOUR CREDIT TERMS. *****

From time to time, Feeney, Inc. may request lien information. Applicant agrees to furnish this information whenever asked. Refusal to supply requested information will terminate credit. In the event of failure to pay for any goods or services furnished by Feeney in accordance with the terms of sales, the applying company hereby agrees to pay in addition to the goods and services, finance charges at 1% per month, any and all costs, expenses and attorney's fees incurred in the collection of the past due account, including, but not limited to, costs and/or attorneys' fees incurred as a result of litigation to collect the past due account.

Company officer's signature: _____ Title: _____

Printed name: _____



Credit References (Minimum of 3)

Firm name: _____

Firm name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Fax: _____

Fax: _____

Firm name: _____

Firm name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Fax: _____

Fax: _____

Bank reference: _____

Account number: _____

Address: _____

Contact: _____

Phone: _____

Fax: _____

Have you and/or the officers in your company ever filed for bankruptcy? No Yes

If yes, name of company: _____ Date: _____

Feeney, Inc. is authorized to check the above references and any other sources for credit information.

