

A CUT ABOVE

1201 Teal Ave ~ Suite A ~ Peotone, IL 60468 (866) 534-3900 toll free phone · (708) 534-3957 (fax)

e-mail: orders@viadon.com · www.viadon.com

Credit Application

| Company Name: | | Date Business Started: | |
|--|--|--------------------------|-------------------------------------|
| 'Bill to' Street Address: | | 'Ship to' Street Addres | s: |
| 'Bill to' City/State/Zip: | | 'Ship to' City/State/Zip | p: |
| Company Phone Number: | | Company Fax Number: | |
| Trade References | | | |
| Name | Phone | Fax | Contact |
| 1) | | | |
| 2) | | | |
| 3) | | | |
| | Bank Re | ference | |
| Bank Name: | | Account Number: | |
| Mailing Address: | | | |
| City/State/Zip: | | | |
| Phone Number: | | Fax Number: | |
| I authorize the bank listed a establishing net 30 terms. | bove to release general accountable Authorization Signature: | nt information to Viadon | LLC for the purpose of <i>Date:</i> |
| Accounts Payable Information | | | |
| Contact Name: | | Title: | |
| Phone Number: | | Fax Number: | |
| Email Address: | | | |