

## **NATIONAL LADDER & SCAFFOLD**

## APPLICATION FOR CREDIT

Dear Customer:

Thank you for your request to establish an account with National Ladder & Scaffold, Co. Please complete this application and return it as soon as possible. Responses from your references can sometimes take several days. If you need to place an order sooner, please contact our sales department and they will arrange an alternative method of payment for you. As always we appreciate the opportunity to serve you now and look forward to serving you in the future.

Business and Credit Information					
Company Name:					
Company Address:					
City:		State:		Zip:	
Phone:		Fax:			
How long at current address?		Date busines		ss started:	
Sole proprietorship: Partnership		Corporation:		: Other:	
A/P Contact Person:		A/P Email Address:			
Bank Name:	Address:			Phone Number:	
Tax Exempt: Yes No			Tax ID#:		
Industry:			*include exemption certificate w/app if applicable		
No. of Vans in Fleet: No. of Pick Ups in Fleet:					
Purchasing Contact Name:		Purchasing Email:			
Purchasing Phone #:			Co Web Address:		
Name of Principals:	Complete Address:			Phone Number:	
1.					
2.					
Business/Trade References					
Please make sure that you include the correct fax number/email address for the accounts receivable department. Also, make sure that the references know you are using them and will respond.					
Business Name:	Address:		Phone:		Fax/or Email Address:
1.					
2.					
3.					
4.					
Signature					
Signature:	Printed Name:			Title:	

## PLEASE FAX BACK TO 248-399-7818

OR EMAIL To: jessica@natlad.com