



**APPLICATION FOR CREDIT**

Return Form by faxing to 515-266-6830 or email to [accounting@housby.com](mailto:accounting@housby.com)

Name (Applicant): \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Select One: Corporation Partnership Proprietorship Personal Desired Credit Limit: \_\_\_\_\_

Date Business Began: \_\_\_\_\_ Accounts Payable Contact: \_\_\_\_\_

Accounts Payable Phone and/or Email Address: \_\_\_\_\_

**REFERENCES**

Checking & Savings: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

1 Supplier: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

2 Supplier: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

3 Supplier: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Tax Exempt Purchases: Yes No If yes, tax permit # (please attach tax form) \_\_\_\_\_

Business Type \_\_\_\_\_ Do you require purchase orders? Yes No

**TERMS AND POLICIES**

Housby Mack, Inc. requires payment of all invoices by the 10<sup>th</sup> of the month after purchase. A service charge of 1 1/2% per month beginning 30 days after purchase will be assessed on the unpaid balance including previous service charges. All accounts past due 60 days will be placed on COD unless special arrangements have been made between Housby Mack, Inc. and you, the customer. Credit limits are set at the sole discretion of Housby Mack, Inc. and may be raised at the request of customer and approval of Housby Mack, Inc. Should the Applicant fail to make payment in conformance with these Terms and Policies, Housby Mack shall be entitled to recover its reasonable attorney fees, costs, and expenses in the enforcement of its rights, from Applicant. Housby reports the ageing of any amounts outstanding to Experian on a monthly basis.

Returned checks will result in the customer being placed on a CASH ONLY BASIS.

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_