



APPLICATION FOR CREDIT

Name of Business _____

Trade Name _____

Address _____

City, State, Zip _____

Type of Business _____

Website: www. _____

Names of Principals - % Ownership – Address – Home Telephone

Organization (Please check one)			
<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> LLC	<input type="checkbox"/> Corporation
(If Corporation: <input type="checkbox"/> Public <input type="checkbox"/> Private)			

State of Incorporation _____ Year Incorporated _____

Sales Tax Exemption Certificate Attached? _____

If not attached, appropriate sales tax must be charged

D & B Number _____ Business Telephone(s) _____

A/P Contact _____ Phone _____ Fax _____

Choose and complete for preferred method of invoice delivery: E-mail: _____ Fax: _____

Ship To Address (if different from above) _____

Name of Bank _____ Account # _____

Address _____

Phone _____ Fax# _____ Contact _____

Trade References (List Name, Complete Address, Telephone Number)

Supplier Account # _____

Address _____

Phone _____ Fax# _____ Email _____

Supplier Account # _____

Address _____

Phone _____ Fax# _____ Email _____

Supplier Account # _____

Address _____

Phone _____ Fax# _____ Email _____

Attach copy of most recent Financial Statements.

List products you will be purchasing from Atlantic Corporation _____

Monthly Credit Line Requested: \$ _____

All information on this credit application is furnished on a confidential basis in support of this request to make commercial purchases on credit terms. The undersigned certifies this information to be true and understands that incomplete or unsigned applications will not be processed.

By signature of this document, permission is granted for release of credit information to Atlantic Corporation by suppliers and banks listed above.

PLEASE READ CAREFULLY

The person, corporation, or firm whose name appears below (Customer) acknowledges that it is able and willing to meet all commitments in regard to purchases made from Atlantic Corporation within the terms as set forth on invoices issued by Atlantic. It is understood that this application is subject to approval by the Credit Department of Atlantic, and that extension of credit, and/or limits thereof, shall be determined solely by Atlantic for the sole benefit of Atlantic. Atlantic reserves the right at its discretion to increase the customer's credit limit upon request by Customer, but such increase shall not affect other provisions of the agreement. All applications approved for credit are governed by the following.

1. An account which has a past due balance or exceeds or will exceed an established credit limit may be subject to future shipments on a C.B.D. or C.O.D. basis. Atlantic also reserves the right to withhold shipments to customers whose credit accounts are past due.
2. The foregoing information and accompanying financial statement are correct and were provided to induce Atlantic to extend credit to Customer.
3. If the account is not paid according to its terms and is referred to an attorney for collection, Customer agrees to pay all costs and expenses of collection, including reasonable attorney's fees.
4. Customer must give Atlantic advance notice of any change in the business structure or ownership. Without such notice, and Atlantic's express acknowledgment and approval, Customer and the original principals to whom credit was extended shall remain liable on the account. Notice hereunder shall be given by certified or registered letter and acknowledged by return receipt.
5. Credit policies are subject to change at the discretion of the Credit Department of Atlantic. Upon the acceptance of the application, and the issuance of an open line of credit, Customer agrees to abide by the credit policies of Atlantic and further agrees to abide by all terms and conditions of this Credit Application.
6. Atlantic requires a valid customer purchase order for each order.
7. **ATLANTIC'S PAYMENT TERMS ARE NET 30 DAYS FROM DATE OF INVOICE. ANY PAST DUE INVOICES SHALL BEAR INTEREST AT THE RATE OF 18% PER ANNUM OR THE HIGHEST RATE PERMITTED BY LAW, WHICH IS LESS.**
8. **ATLANTIC REQUIRES A HARD-COPY CUSTOMER PURCHASE ORDER BEFORE ORDER CAN BE ENTERED AND FULFILLED.**
9. **ALL PURCHASES BY CUSTOMER ARE SUBJECT TO ATLANTIC'S TERMS AND CONDITIONS OF SALE, NOTWITHSTANDING ANY CONTRARY TERMS IN ANY PURCHASE ORDER OR OTHER CUSTOMER GENERATED DOCUMENT. ATLANTIC'S TERMS AND CONDITIONS CAN BE FOUND AT www.atlanticpkg.com OR WILL BE PROVIDED TO THE CUSTOMER ON REQUEST**

Authorized Signature

Print Name

Title

Date

Upon Completion, Fax To: Credit 910.762.6272

Atlantic Sales Representative / Number

Atlantic Branch

APPROVED FOR CREDIT	
Date _____	Amount _____
Account # _____	