

Please print and fill out this form and then scan and email to us, or fax it to us. We will diligently work hard to get your application processed and referenced check. Once though our process we will let you know.

Thank you very much for taking the time to fill this form out and your desire to do business with us.

We look forward to serving you and working hard to earn your business everyday.

## **Company Information**

Business Address (not PO Box)				
illing Address (if different than above				
hipping Address (if other than busines	ss address)			
elephone Number	Fax Number	Email Address		
Vebsite	Type of Business			
wner	Date Business Established	No. of Employees		
ederal Taxpayer Identification #	Dun & Bradstreet #	SSN (optional)		
Account Typecredit on account Desired creditcash, credit card only (please sign				
Bank References				
ank	Address	Phone		
ecount #	Туре	Contact		_
Trade References				
Business Name	Address	City	State	Zip Code
Telephone Number	Fax Number	Email Address		
Business Name	Address	City	State	Zip Code
	Fax Number	Email Address		_
Telephone Number				
_	Address	City	State	Zip Code
	Address Fax Number	City  Email Address	State	Zip Code
Business Name  Telephone Number  Customer Account Adminishe person listed below is fully authorize	Fax Number  Strator  ted to create & maintain a list of authorized buye authorized person will also determine the credit li	Email Address ers within your company who can pla	ice orders & pu	rchase materials

The undersigned agrees that all purchases of product from Marshall E. Campbell Co. (Campbell) will be governed by Campbell's standard terms and conditions of sale. Any modifications of such terms or any additional terms will not be binding upon Campbell unless they are in writing and signed by an officer of Campbell. Any credit extended by Campbell to the undersigned and the limits of such credit shall be at Campbell sole discretion and may be reduced or revoked by Campbell at any time. Campbell's standard credit terms are NET 30 days from receipt of invoice. Campbell reserves the right to charge interest at the rate of 18% per annum or at the highest rate available under applicable law to any account balance exceeding agreed upon payment terms. It is further understood and agreed that the purchaser will pay all reasonable attorney fees and court costs incurred by Campbell in connection with any collection action. I certify that all information on this application is correct and the listed bank and references are authorized to release appropriate information to Campbell, which will be held in confidence. I further certify that an authorized officer, partner or representative has signed this application. By signing below, I acknowledge and agree to the foregoing conditions.

Authorized Signature (required)	
Date	
Please print name and title	
Please email, fax or mail completed application to the address below. Thank you	
Marshall E. Campball Co.   2075 Lapage Poad   Port Huran, ML 48060   P. 800 462 40	50 IE- 810 085 6680 IAP@macamphall.com

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