



Werk-Brau Co., Inc.
 PO BOX 545 | 2800 Fostoria Avenue
 Findlay, OH 45839-0545
 p: 1-800-537-9561 | f: 419-422-7207
 www.Werk-Brau.com

APPLICATION OF CREDIT

BUSINESS CONTACT INFORMATION

Name of Firm				<input type="checkbox"/> Sole proprietorship
DBA				<input type="checkbox"/> Partnership
Website Address				<input type="checkbox"/> Corporation
Phone		Fax		<input type="checkbox"/> Other _____
Physical Address				
City		State		Zip Code

BUSINESS AND CREDIT INFORMATION

Billing Address				
City		State		Zip Code
Phone		Email		Fax
Year Established		Federal Tax ID #		
Principal Product / Service			Projected Annual Purchase from Werk-Brau	

PRINCIPAL	TITLE

CONTACT INFORMATION

	NAME	PHONE	EMAIL	FAX
Branch Manager				
Sales				
Accounts Payable				



Please provide a minimum of four (4) references whom you have current transactions with. Be sure to provide all requested data on each reference so that we may efficiently and timely review your application. Also please be sure that the reference is aware and willing to provide data regarding your business transactions when we contact them. Include at least one reference that you purchase heavy equipment parts from and DO NOT include financial institutions or those you have loans with.

BUSINESS/TRADE REFERENCES

Company Name				Type of Business	
Address					
City		State		Zip Code	
Phone		Email		Fax	
Company Name				Type of Business	
Address					
City		State		Zip Code	
Phone		Email		Fax	
Company Name				Type of Business	
Address					
City		State		Zip Code	
Phone		Email		Fax	
Company Name				Type of Business	
Address					
City		State		Zip Code	
Phone		Email		Fax	
Company Name				Type of Business	
Address					
City		State		Zip Code	
Phone		Email		Fax	

TERMS & CONDITIONS UPON APPROVAL

1. Customary terms are Net 30, so payment is due 30 days from the date of the invoice, unless otherwise stated
2. Balances not received within 30 days from the date of the invoice are past due and could be subject to a finance charge.
3. The customer hereby agrees to pay all costs of collections or legal fees deemed necessary should collection efforts be required due to non-payment.

The authorized individual signing below on behalf of the applicant acknowledges by signing that he/she has read, understands its contents and expressly agrees to its terms & conditions as stated.

This form must be signed by a Corporate Officer, General Partner, or Owner.

SIGNATURE

Name			Title	
Signature			Date	