

PartyExpress.com – Credit Application/Agreement
 One Beistle Plaza Shippensburg, PA 17257 717-532-2131

For the ***fastest*** review of your references, LEGIBLY COMPLETE the information requested, ***especially fax numbers and email addresses for your bank and trade references.***

Return this form to our Credit Department via email msrohrer@beistle.com or fax 717-532-2138.

Company Name _____

DBA (if applicable) _____ Fed Tax ID No _____

Street Address _____

Mailing Address _____

City and State _____ Zip _____

Principal(s)/Owner(s) _____

Date _____ Phone _____ FAX _____

Website _____ Email _____

Name and State in which this business is registered _____

Any other trade names, DBA's, etc with which the principal listed above is associated.

Company name _____ City _____ State _____

- Dun & Bradstreet No. _____ ASI No _____
- Your company is a Corporation Partnership Sole Owner
- Business location is Owned Rented
- How long has your co Been in business _____ (mos,yrs) At present address _____ (mos,yrs)

A/P Manager or person to contact concerning financial matters

Name _____ Title _____

Phone _____ ext _____ Fax _____

A/P Email _____

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Trade References - Four firms from whom you currently purchase on OPEN ACCOUNT terms

Firm _____
Address _____
City/State/Zip _____
Phone _____
Email _____
FAX _____ Acct No _____

Firm _____
Address _____
City/State/Zip _____
Phone _____
Email _____
FAX _____ Acct No _____

Firm _____
Address _____
City/State/Zip _____
Phone _____
Email _____
FAX _____ Acct No _____

Firm _____
Address _____
City/State/Zip _____
Phone _____
Email _____
FAX _____ Acct No _____

The undersigned authorizes and releases all persons and companies listed on this application to furnish information and authorizes the checking of credit. The undersigned agrees to pay all returned check charges, collection costs, court costs and attorney fees incurred to collect delinquent balances.

Principal's Signature _____ Printed Name _____ Date _____

Personal guarantee - In consideration for credit extended, the undersigned contracts and guarantees to the faithful payment, when due, of all accounts of the company seeking credit for five years from the date of this application. The undersigned expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notice of default by the company seeking credit and all other notices to which the guarantor might be entitled. Revocation of the guarantee shall be in writing & delivered by certified mail.

Principal's Signature _____ Printed Name _____ Date _____

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Bank reference:

Receipt of a bank reference is an integral part of our credit review. Your assistance and your bank's cooperation in providing the information requested will facilitate your consideration for trade credit.

Please complete the following:

Your Company's Bank _____
Your Account No _____
Bank's Address _____
City & State _____ Zip _____
Email _____ Fax _____
Contact Person at Bank _____
Phone _____ Ext _____
Email _____

I hereby authorize the bank/financial institution listed above to reveal normal credit information to the Credit Department of THE BEISTLE COMPANY for the purpose of consideration of establishing trade credit.

Your Company's Name _____
Street Address _____
City and State _____ Zip _____
Signature _____
Title _____ Date _____

To the banking establishment designated above:

The following information is requested by THE BEISTLE COMPANY, a major manufacturer of paper and party decorations, located at One Beistle Plaza, Shippensburg, PA 17257, phone 717-532-2131. Information that you provide will be considered for the purpose of establishing trade credit with our company.

If you have any questions or concerns regarding the release of credit information for the account specified, please contact your customer immediately.