



## Credit Application

### Company Information

Company Name:		DBA:	
Is this a Division or Subsidiary? <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Parent:	
Address:		City:	Years at this address:
State/Province:		Zip/Postal:	Country:
Phone:		Fax:	
Website:		Email:	
Type of Business: <input type="checkbox"/> Distributor <input type="checkbox"/> Manufacturer <input type="checkbox"/> Retailer <input type="checkbox"/> Service Provider			
Number of Employees:		Annual Sales:	
Amount of Credit Requested:		DUNS #:	
Note: While not mandatory, you can help the credit approval process considerably by attaching a copy of your most recent financial statement.			

Billing Information	
Address	
City	State      Zip
Country	Phone
AP Contact	
Email	
Does your company require a PO? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Invoice Preference	
Invoice/Email Address	
Special Invoice Instructions	

Shipping Information	
Address	
City	State      Zip
Email to send Shipment Tracking to	
Shipping Preference:	
<input type="checkbox"/> Prepaid & Add	
<input type="checkbox"/> Collect	
UPS/FedEx # (If collect)	

Sales Tax Information	
Will your orders be taxable?	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	
Federal Tax ID/EIN	
*If no, please attach a copy of your tax exemption certificate. All shipments will be charged tax until a valid certificate is on file.	
**If your company is tax exempt in <b>MULTIPLE</b> states, please provide <b>ALL</b> applicable exemption certificates.	

### Ownership Information

<input type="checkbox"/> Sole Proprietor		<input type="checkbox"/> Partnership		<input type="checkbox"/> Corporation		<input type="checkbox"/> Limited Liability Corporation	
If yes to Corporation or LLC:		State of Incorporation:		Date of Incorporation:			
Is the company:		<input type="checkbox"/> Private		<input type="checkbox"/> Public Company		<input type="checkbox"/> Traded As	
Has a tax lien or civil suit been filed against the company or any owner, officer, director or member?		<input type="checkbox"/> Yes		<input type="checkbox"/> No			
Has the company or any owner, officer, director or member filed bankruptcy in the last 6 years?		<input type="checkbox"/> Yes		<input type="checkbox"/> No			
Are there any past due taxes owed by the company or any owner, officer, director or member?		<input type="checkbox"/> Yes		<input type="checkbox"/> No			
SIC #:		NAICS #:					

Please Return Completed Form to: [credit@lesman.com](mailto:credit@lesman.com)



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### List of Owners/Officers

For Sole Proprietor or Partnership: List all Owners and/or Partners. For Corporations or Limited Liability Corporations: List all Officers/Members

Name	Title	Home Address (Proprietor or Partnership Only)

### Bank Reference

<b>Bank Name:</b>		<b>Contact:</b>	
<b>Address:</b>			
<b>City:</b>		<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Fax:</b>	<b>Email:</b>	
<b>Savings Account #:</b>			
<b>Checking Account #:</b>			

### Business/Trade Reference

(no utilities, freight, or service companies; please list at least 1 from our industry.)

<b>Company Name:</b>		<b>Person to Contact:</b>	
<b>Address:</b>		<b>Email:</b>	
<b>Phone:</b>	<b>Fax:</b>	<b>Account #</b>	
<b>Company Name:</b>		<b>Person to Contact:</b>	
<b>Address:</b>		<b>Email:</b>	
<b>Phone:</b>	<b>Fax:</b>	<b>Account #</b>	
<b>Company Name:</b>		<b>Person to Contact:</b>	
<b>Address:</b>		<b>Email:</b>	
<b>Phone:</b>	<b>Fax:</b>	<b>Account #</b>	
<b>Company Name:</b>		<b>Person to Contact:</b>	
<b>Address:</b>		<b>Email:</b>	
<b>Phone:</b>	<b>Fax:</b>	<b>Account #</b>	

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### Agreement and Authorization

By signing this Credit Application, the individual executing this Application below on behalf of the company represented in this agreement (Buyer) represents and warrants to:

1. He/she is authorized to execute this Application on behalf of Buyer;
2. The information set forth in this Application is accurate and complete; and
3. The Buyer; whether an individual or individuals, a proprietorship, a partnership, a corporation, a LLC, a PA, or any other entity, hereby agrees to the faithful payment, when due, of all accounts of said Buyer for the purchases made; and
4. Buyer is solvent and that it pays its obligations as they become due. Buyer will not place any order with Lesman Instrument Company unless it reasonably believes that it will be solvent and able to pay its obligations as they become due. The preceding representation and warranty will be deemed to be repeated in each purchase by Buyer; and
5. Buyer agrees that the prevailing party in any proceeding to enforce this agreement or to resolve a dispute with Lesman Instrument Company will be entitled to recover its costs, including attorneys' fees, court costs, collection agency fees, and all other costs associated in collecting its monies from the other party; and
6. Buyer understands that submission of this application and agreement does not guarantee credit will be extended to buyer. In the event credit is extended, Buyer understands Lesman Instrument Company or may, at any time, without notice, cancel all credit available to Buyer and refuse to make any further credit advances. In the event Lesman Instrument Company determines that information contained on this Credit Application is false or misleading, or if Lesman Instrument Company receives other false or misleading credit information from Buyer of any kind or nature, Lesman Instrument Company may without further notice cancel any orders in house, or any deliveries in progress to Buyer. Any false or misleading information by Buyer shall be construed as a material default, and any invoices outstanding shall be immediately due and payable in full.

In signing this Application, Buyer agrees to all of the above and hereby grants permission for credit information to be verified by companies and financial institutions that the Buyer has specified on this document and others that Lesman Instrument Company becomes aware of during the credit review process and from time to time. The undersigned also understands that Lesman Instrument Company, will retain this Application, whether or not it is approved, and that Lesman Instrument Company will consider this Application as a continuing statement of the undersigned's financial position and situation until notified otherwise by the Buyer.

Faxed and Emailed documents will be deemed as original. No oral agreements will be accepted. The terms of this Credit Application overrides all others.

Name (Please Print or Type):

Title:

Authorized Signature:

Date: \_\_\_\_\_

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