



Email completed form to:
phoenixhabtech@gmail.com
or Fax form to: (847) 750-2902

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

All information must be filled out completely. All references must contain current contact names, phone and fax numbers. Please attach a copy of your tax exemption certificate when submitting this application. All information must be accurate. Any inaccurate information will result in denial of credit or delay the processing of application.

BUSINESS INFORMATION

APPLICATION DATE: _____

LEGAL BUSINESS NAME: _____

YEARS IN BUSINESS: _____ BUSINESS TYPE _____

MAILING ADDRESS: _____

SHIPPING ADDRESS: _____

MAIN OFFICE PHONE: _____ MAIN FAX NUMBER: _____

OWNERS AND OFFICERS

1) _____

PRINT NAME	TITLE	PHONE
_____	_____	_____

2) _____

PRINT NAME	TITLE	PHONE
_____	_____	_____

REQUESTED CREDIT AMOUNT: _____ ESTIMATED ANNUAL PURCHASE: _____

ACCOUNTS PAYABLE INFORMATION

A/P MANAGER: _____ PHONE: _____

A/P CONTACT: _____ PHONE: _____

BANK INFORMATION

BANK REFERENCE CONTACT NAME: _____ PHONE: _____

ACCOUNT TYPE: CHECKING SAVINGS OTHER

ACCOUNT NUMBER(S): _____

TRADE REFERENCES

1) COMPANY NAME: _____ ACCOUNT # _____

ACCOUNTS RECEIVABLE CONTACT: _____

PHONE & EXTENSION: _____ FAX #: _____

2) COMPANY NAME: _____ ACCOUNT # _____

ACCOUNTS RECEIVABLE CONTACT : _____

PHONE & EXTENSION: _____ FAX #: _____

3) COMPANY NAME: _____ ACCOUNT # _____

ACCOUNTS RECEIVABLE CONTACT : _____

PHONE & EXTENSION: _____ FAX #: _____

AGREEMENT

In consideration of credit being extended, the applicant shall be deemed to have agreed to the terms and conditions herein and acknowledge if invoices are not to paid when due, that the applicants name may be listed in any collection or credit rating file. If this account is collected on by a collection agency or attorney, by suit or otherwise, the applicant agrees to pay all collection fees, attorney fees, and cost of collection. Terms are 30 days from the date of the invoice/shipment date. Prices reflect cash or check payments only, a convenience fee of 3% will be added to credit card payments accepted through our PayPal services. Charges unpaid after 30 days are subject to 1-1/2 percent per month finance charges. Claims arising from invoices must be made within seven working days. Credit privileges may be revoked at any time without invalidation of the terms of this agreement. Accounts past 60 days will be considered Not in Good Standing and all orders not delivered will be placed on hold and 30 day terms will be revoked either permanently or until customer is granted Good Standing status of account by paying all past due. By submitting this application, you authorize Phoenix Habilitation Technologies, LLC (PHT) to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURE OF AUTHORIZED APPLICANT: TITLE: _____

DATE: _____
PRINTED NAME OF AUTHORIZED APPLICANT

SIGNATURE OF PREPARER: TITLE: _____

DATE: _____
PRINTED NAME OF PREPARER