



Credit Application

Traj et Products, Inc. 1003 South Hazel Street Glenwood, IA 51534 Phone: 712-527-1800 Fax: 712-527-4331

Name: _____ Year Established: _____

Subsidiary of: _____ Division of: _____

Address: _____

City: _____ State: _____ Zip + 4 : _____

Phone: () _____ Fax: () _____

Purchases Non-taxable: Yes No If yes, please attach Exemption Certificate

P.O. Required: Yes No Estimated Credit Line Required: _____

Type of Business: Corporation Partnership Proprietorship

Owners/Officers:

_____ Title: _____

_____ Title: _____

_____ Title: _____

Nature of Business: _____

Bank Reference: _____ Phone: () _____

Address: _____ Contact: _____

City: _____ State: _____ Zip: _____

Business References:

Name	Address	City/State/Zip	Phone

Agreement: The undersigned acknowledges and agrees that Trajet Products, Inc. will rely on the information provided by the undersigned in this Credit Application in connection with any extension of credit. The undersigned warrants that all information contained herein is true and accurate. The undersigned further agrees that any extension of credit by Trajet Products, Inc. shall be subject to and in consideration of the following terms and conditions:

1. Payment for purchases shall be due as stated on each invoice or statement.
2. Past due payments will be subject to a late payment charge of 1-1/2% per month, (or the highest legal interest rate of the state in which the sales occurs).
3. The undersigned will be responsible for payment of any collection expenses incurred by Trajet Products, Inc. including attorneys' fees and costs in the event the account is turned over for collection.
4. The undersigned's bank and references to release information as requested by Trajet Products, Inc.

NOTE: BY SIGNING BELOW, YOU ACKNOWLEDGE AND AGREE TO THIS COMPLETE APPLICATION.

Signature: _____

Printed Name: _____ Title: _____ Date: _____