

IFS COATINGS CREDIT APPLICATION

3601 North Interstate 35 Gainesville, TX 76240

Phone: 940.668.1062

Return application to: coatingscreditapps@ifscoatings.com****Include your recent W-9 and Tax Certificate (Resale or Exemption)******BUSINESS INFORMATION
(BOLD AREAS REQUIRED)****Company Name:****DBA or Company Affiliate:****Business address:****City:****State:****ZIP:****Phone:**

Fax:

Email:

Name(s) of owners:

Credit amount requested:

Annual Sales:

How long in business:

Would you like to be set up for electronic invoicing: YES

NO

Email to send electronic invoices:**BANK INFORMATION**

Bank name:

Branch address:

City:

State:

ZIP:

Bank contact:

Phone:

Fax:

Type of account:

Account number:

TRADE REFERENCES

1) Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

2) Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

3) Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

AGREEMENT

1. I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. I hereby authorize the bank and trade references listed in this credit application to release necessary information to your company in order to verify the information contained herein.
2. All invoices are to be paid in accordance with invoice Terms. Past due invoices may be subject to a late fee.
3. All requested documents (current W-9 and Tax Certificate) must be submitted with this application to ensure timely processing. If all documents are not received, your application will be denied as incomplete.

SIGNATURE REQUIRED

Title:

Date:

Title:

Date: