



527 Park Lane, Suite 200
Waterloo, IA 50702

Phone: 319-234-7942 Fax: 319-234-7978

CREDIT APPLICATION

Company Name _____

Shipping Address _____ City _____ State _____ Zip _____

Billing Address _____ City _____ State _____ Zip _____

Phone # _____ Fax # _____

Accounts Payable Contact _____

Type of Organization: Corporation _____ Partnership _____ Individual _____

If Corporation, Date and State of Incorporation _____

Number of Years in Business _____ Type of Business _____

Owners and/or Officers _____

Are you an OPGA member? (Yes/No) _____

REFERENCES:

Bank _____ Address _____

Bank Officer Name and Phone # _____

	<u>Name of Creditor</u>	<u>Address</u>	<u>Contact</u>
1.	_____	_____	_____
	Phone: _____		Fax: _____
2.	_____	_____	_____
	Phone: _____		Fax: _____
3.	_____	_____	_____
	Phone: _____		Fax: _____

Signature _____ Title _____ Date _____

YOUR SIGNATURE ABOVE MEANS AGREEMENT TO OUR TERMS NET 30 DAYS. A TIME PRICE DIFFERENTIAL OF 1.5% PER MONTH (18% PER ANNUM) WILL BE CHARGED ON ALL PAST DUE ACCOUNTS.

**PLEASE FAX COMPLETED APPLICATION TO 319-234-7978 OR 800-408-3595
OR MAIL TO: 527 Park Lane, Suite 200 – WATERLOO, IA 50702**