

TIP TEMPerature Products

340 W. Broad Street - Burlington, NJ 08016

Phone: 609-239-1900 Fax: 609-239-1911 www.tiptemp.com

CREDIT APPLICATION

Ver. Jan.2012

Please provide the following information and fax to
609 -239-1911. Any missing information may result in the delay of your company's
order. **First Time** NET 30 Orders must be minimum \$250.00

Business Name: _____

D.B.A (If applicable): _____

Bill to Address: _____

City/State/Zip: _____

Phone Number: _____

Fax Number: _____

Website: _____

Contact/Buyer: _____ ext: _____

Email Address: _____

Accounts Payable Contact: _____ ext: _____

Email Address: _____

Ship to Address: _____

(If different from Bill to)

How did you find us? (Check One)

Web Search Engine Friend Newsgroup

Publication (please specify) _____ Email Invitation

Repeat Order

Account Requested: COD Cash in Advance Net 30

EIN Number: _____

Trade References:

BE SURE TO PROVIDE EACH REFERENCE'S FAX NUMBER

(1) Company Name: _____
City/State/Zip: _____
Phone: _____ Fax: _____
must be filled in!
Account Number: _____

(2) Company Name: _____
City/State/Zip: _____
Phone: _____ Fax: _____
must be filled in!
Account Number: _____

(3) Company Name: _____
City/State/Zip: _____
Phone: _____ Fax: _____
must be filled in!
Account Number: _____

Bank Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

Business Account Number: _____

Account Type: Checking Savings Loan

I the undersigned understand that the information furnished on this application is for the purpose of establishing an account and/or obtaining credit privileges from TIP Temperature Products. Our Terms and Conditions are available at www.tiptemp.com I further authorized any person having information about our firm (myself/ourselves) to release financial information and credit reports to TIP Temperature Products. I agree that all the information provided is accurate and complete.

Signature

Date

Please Print Name and Title