



CREDIT APPLICATION

1. Company Information

(TYPE OR PRINT NEATLY)

Full Legal Name/Business Entity		Phone #	Fax #	
Doing Business As (DBA)				
Billing Address		City	State	Zip
Company Type: (Circle One)	Proprietorship	Partnership	Franchise	Corporation
	Other:			
No. of Employees	Year Business Est.	Annual Sales	Type of Business	
Federal Tax ID (if incorporated)		State of Incorporation		
Email Addresses:	Sales:	Billing:	Website:	

2. Owner Information

Full Name (including middle initial)		Title	Social Security #	
Home Address		City	State	Zip
Phone				
Email Address				

3. Bank References

Bank Name	Account Number	Contact		
Address	City	State	Zip	Phone
Fax				

4. Credit Card (Optional)

Credit Card #	Expiration	CVV: (last three digits on back)	Circle One: MasterCard Visa Discover	
Printed Name	Signature		Phone	
Address	City	State	Zip	

Checklist:

- I have included no less than 5 trade credit references.
- I have included my sales tax exemption certificate.

Until credit is approved an alternate payment option must be chosen. Credit approval takes approximately 2 weeks. All open account privileges will be revoked if credit terms are not met. Customer agrees to pay a service charge of 1.5% per month, based on an annual interest percentage rate of 18 percent on all overdue or delinquent balances. In the event any account is placed for collection, customer shall pay all collections costs, court costs, and interest related to the delinquent account. Customer agrees that any action for payment may only be made, maintained and concluded in the Circuit Court of Franklin Park, IL. Customer agrees that this credit application and agreement shall be deemed made in and controlled by Illinois Law. Customer has read, understands and agrees to be bound by the terms and conditions set forth above in return for credit being extended. The applicant agrees to be fully responsible for the activity of all sales personnel, that ethical and proper selling practices will be followed and that immediate attention be given to all complaints involving material, workmanship or sales representations. The applicant gives Mint Masters, Inc. the right to check credit and bank references.

Signature(s) _____ Date _____

Return by fax to: MINT MASTERS, INC. CREDIT DEPT. (847) 451-8636
 Return by email to: info@mintmasters.com



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REFERENCES

Company Name			
Address	City	State	Zip
Phone	Fax		
Account #	Email		

Company Name			
Address	City	State	Zip
Phone	Fax		
Account #	Email		

Company Name			
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