

NEW CLIENT APPLICATION

REQUESTED TERM (check one): COD- Company Check			Amount:		☐ Net 30 days open account Amount:		
1. NAME/ADDRE	ESS						
Last	Firs	t		Middle Initial	Name	of Business	
Address	City	,	State	Zip Code	Phone		
Title	Тах	I.D. No.		Resale No.			
2. COMPANY INF	FORMATION						
					☐ Corporatio	n 🗆 Partnership	☐ Proprietorship
Type of Business				In Business Since	Legal Form Under	Which Business Operates	
If Division/Subsidiary, Name of Parent Company				In Business Since			
Name of Company Pri	ncipal Responsible for Business Transa	ctions		Title			
Address	Ci	City		State	Zip Code	Phone	
Name of Company Pri	ncipal Responsible for Business Transa	ctions		Title			
Address	City			State Zip Code Phone			
3. BANK REFERE	NCES						
Name of Institution	Checking A	Checking Account No.		Name of Institution	Name of Institution Checking Account No.		
Address	Address			Address			
Phone	hone			Phone			
4. TRADE REFERI	ENCES						
T. INADEREIEN	LINCLS						
Company	Contact Name	Company		Contact Name	Сотра	nny C	Contact Name
Address		Address			Addres	s	
Phone	Fax	Phone		Fax	Phone	F	ax
Email		Email			Email		
extended to applicant, Searing I record, applicant's failure to me	is submitted by applicant to Searing Industries ndustries reserves the right at any time thereaff et sales volume requirements established by Se published on Searing Industries invoices at the t	er to change or revoke si aring Industries, and/or	uch credit for applicant's ut	any reason, including but not lir ilization of such credit limit. All	mited to, credit policy cha product sales by Searing	inges by Searing, applicant's finar Industries to applicant will be sul	ncial condition, applicant's payment pject to Searing Industries standard
provided by law for invoice amo Industries should commence ar or not suit is filed. This agreeme change in customer's form of bu	nent in full to Searing Industries for all amounts in unts that are past due. Should customer defau ny action or actions, or otherwise seek to enfore ent is strictly confidential and is not transferable usiness, shall not be effective as to Searing Indu he internal laws of the State of California, excluss.	t in any such payment(s te this agreement agains or assignable without pr stries, until Searing Indu), Searing Ind it customer, co ior written co stries receive	ustries shall have the right, with ustomer agrees to pay reasonal onsent of Searing Industries. Cu is actual notice of the change by	nout notice to customer, the attorney (s) fees, cour stomer agrees that any chy certified mail. This appli	to declare all invoice amounts du t costs, and other expenses incu nange in liability for any debts inc cation and agreement shall be co	e and payable. In the event Searing rred by Searing Industries, whether urred to Searing Industries due to a onstrued, interpreted, and enforced



Signature



Title

Authorized Individual (Print Name)