

Apparatus Repair & Engineering, Inc. 17500 York Road, Hagerstown, MD 21740 Phone: (301) 739-8285 ~ Website: www.apprep.com



~ Customer Request For Credit ~

| | Customer Bill To I | nformation | | | | Fields | s With | RED Borde | r are Re | quired! |
|---|-----------------------|------------------|----------------------------|----------------------------------|---------------|------------|-----------|-----------|----------|---------|
| Company Name: | | | | | | | FEIN/ | SSN: | | |
| Bill To Addr Ln 1: | | | | Bill T | o Addr L | .n 2: | | | | |
| Bill to City: | | Bill to | State: | | | | Bill to | Zip Code: | | |
| Bill to Phone: | | Bill to | Email: | | | | | | | |
| Virginia Company? What Tax Jurisdiction: WV Company? What Tax Jurisdiction: | | | | | | | | | | |
| If this company is a WEST VIRGINIA Company, is it within the MARTINSBURG City Limits?: | | | | | | | | | | |
| If you're listed in Dun & Bradstreet, under what name is the rating listed?: | | | | | | | | | | |
| How many years has this Company been in business?: Operating at it's present location?: | | | | | | | | | | |
| Offer a brief description of this Company's Business Activity: | | | | | | | | | | |
| Will purchases from A.R.&E. be TAXABLE? (If NO, TAX EXEMPTION form must be filled out!): Yes No | | | | | | | | | | |
| Will your Company REQUIRE a PO Number be assigned to invoices, in order to be paid?: | | | | | | | | | | |
| Customer Ship To Information | | | | | | | | | | |
| Company Ship To: | Ship To Attn: | | | | | | | | | |
| Ship To Addr Ln 1: | Ship To Addr Ln 2: | | | | | | | | | |
| Ship to City: | Ship to State: | | | | | Ship to | Zip Code: | | | |
| Ship to Phone: | Phone: Ship to Email: | | | | | | | | | |
| Corporate Structure (Select one from list below) | | | | | | | | | | |
| Corporation General LLC/LLP Sole Partnership Government Individual | | | | | | | idual | | | |
| | List the Offic | ers, Partners, C | Owners | or Di | rectors | of this | Comp | | | |
| Name: | | Title: | | | | 1 | | Phone: | | |
| Street: | | City: | | | | State: | | | Zip: | |
| Name: | | Title: | | | | | | Phone: | | |
| Street: | | City: | | | | State: | | | Zip: | |
| Name: | | Title: | | | | | | Phone: | | |
| Street: | | City: | | | | State: | | | Zip: | |
| In the last 5 years, have any of these officials been involved in a bankruptcy of this or any other entity? | | | | | | | | | | |
| Customer Banking/Financial Information | | | | | | | | | | |
| | | | | ancia | l Informa | ation | | | | |
| Bank Name: | | | | | l Information | | : | | | |
| Bank Name: Bank Addr Ln 1: | | | | Bank | | Name | : | | | |
| | | | | Bank Bank | Contact | Name | : | Zip Code: | | |
| Bank Addr Ln 1: | | | ing/Fina | Bank Bank State: | Contact | Name | | Zip Code: | | |
| Bank Addr Ln 1: City: | | | ing/Fina Bank S Bank | Bank Bank State: Email: | Contact | Name 2: | | Zip Code: | | |

modified: 10/6/2020

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| List Three (3) Trade References For This Company | | | | | | | | | |
|--|---------------|------|--|--|--|--|--|--|--|
| Company: | Contact Name: | | | | | | | | |
| Street: | City: State: | Zip: | | | | | | | |
| Phone: | Email: | | | | | | | | |
| | | | | | | | | | |
| Company: | Contact Name: | | | | | | | | |
| Street: | City: State: | Zip: | | | | | | | |
| Phone: | Email: | | | | | | | | |
| | | | | | | | | | |
| Company: | Contact Name: | | | | | | | | |
| Street: | City: State: | Zip: | | | | | | | |
| Phone: | Email: | | | | | | | | |

| For A.R.&E. Office Use ONLY below this line. | | | | | | | | | | | |
|--|------------------------------|--------------|--|------------|------------------|-------------|-------------|---------|------|----------|--|
| Date Recv'd: | ate Recv'd: Date Ref Mailed: | | | | Credit: APPROVED | | | DENIED: | | Amt: | |
| Cust. Nbr.: | F | Price Class: | | Sales Rep: | | Sales Terr: | Sales Terr: | | Sale | s Terms: | |