

10310 Aerohub Boulevard
Cincinnati, OH 45215

+1 513.351.9919
800.860.4TMS

CREDIT APPLICATION

BUYER INFORMATION

COMPANY NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

MAIN CONTACT NAME, PHONE _____

BUYER NAME, PHONE _____

A/P NAME, PHONE, EMAIL _____

PRODUCT, SERVICE _____

YEARS IN BUSINESS _____ NUMBER OF EMPLOYEES _____ D&B NUMBER _____

TAX ID NUMBER _____ TAXABLE* OR NON-TAXABLE _____
(IF INDIVIDUAL, INCLUDE SOCIAL SECURITY NUMBER) (IF NON-TAXABLE, PLEASE ATTACH TAX EXEMPT CERTIFICATE)

BANK INFORMATION

BANK NAME _____ BRANCH _____

CONTACT NAME _____ PHONE / EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TRADE REFERENCES (PLEASE COMPLETE ENTIRE SECTION)

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

I am authorized to submit this application on behalf of the applicant named above and acknowledge that the information provided is for the purpose of obtaining credit and is warranted to be true. Per the signature below, The Modal Shop, Inc. (TMS) is authorized to investigate references listed pertaining to credit and financial responsibility. I understand and agree that all necessary collection, legal expenses, and interest will be charged to debtor in the event of default of failure to pay for goods sold/rented and delivered. I am aware that failure to pay within stated terms will result in TMS imposing a monthly finance charge of 1.8% (18% per annum).

NAME (PRINT) _____ TITLE _____

SIGNATURE _____ DATE _____

* The Modal Shop is authorized to collect sales tax in California, Indiana, Michigan, Ohio, and Wisconsin only.
If your products are delivered to any state other than listed above and is taxable, please remit taxable amount due directly to your state.