

Application for Credit



THE LIFT TRUCK
PROFESSIONALS
SINCE 1948

McCall Handling Company
8801 Wise Avenue
Dundalk, Md
United States
21222
Phone: 800-247-9000
Fax: 410-388-2608
www.mccallhandling.com

Company Name:

Trading as:

Address

City State Zip Code

Country

Type of Business:

Contact Name: Contact Title:

Business number: Fax number: No. of years in business:

DUNS #: Tax Exempt: yes no (If yes supply copy of certificate)

Federal tax ID:

Trade References

| | Business Name | Account Number | Contact Name | Phone | Fax |
|-----|---------------|----------------|--------------|-------|-----|
| 1.) | | | | | |
| 2.) | | | | | |
| 3.) | | | | | |
| 4.) | | | | | |

Business Checking Accounts

| | Bank | Bank Branch Contact | Phone Number |
|-----|------|---------------------|--------------|
| 1.) | | | |
| 2.) | | | |

Loans-Finance Co.

| | Name of Loan Institution | Contact | Phone Number |
|-----|--------------------------|---------|--------------|
| 1.) | | | |
| 2.) | | | |

CREDIT TERMS

- The applicant certifies that all information attained in this credit application is true and correct, and consents to the obtaining of credit and other information as may be used any time in connection to the customers account hereby applied for and to the disclosures of any credit information concerning the applicant and its principles.
- The applicant agrees to the terms of service (Net 30) unless otherwise agreed upon in written form. A late charge of 1.5% per month will be charged for all outstanding balances. A service charge of \$35 will be billed for each check returned by our bank for any reason.
- In the event the account is turned over to an attorney or other agency for collection, or suit is brought on same, or the same is collected through any judicial proceeding whatsoever, applicant shall pay all reasonable attorney's fees and court costs incurred by McCall Handling Company, or any of its subsidiaries and affiliated entities.

The undersigned has read and accepted the above credit terms and conditions

Printed Name: Title:

Officer Signature: Date:

Once you have finished filling out this form save it and then attach the Credit Application to your return E-mail.
E-mail the completed Credit Application to "accounting@mccallhandling.com"