



CREDIT APPLICATION

UNIVERSAL LUBRICANTS, LLC
P.O. BOX 2920, WICHITA, KS 67201
PHONE: 1-800-444-OILS FAX: 316-832-0301

PLEASE COMPLETE AND RETURN TO OUR OFFICE AT YOUR EARLIEST CONVENIENCE.

FIRM NAME \_\_\_\_\_

SOLD-TO (BILLING) ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SHIP-TO (SHIPPING) ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COUNTY \_\_\_\_\_ \*TAX JURISDICTION \_\_\_\_\_

PHONE ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_

INVOICE TEXT: (Special instructions, ex: P.O. required, etc.) \_\_\_\_\_

TAX STATUS [ ] TAXABLE [ ] RESALE [ ] EXEMPT [ ] FARM SALES TAX NO. \_\_\_\_\_

(if no tax number is provided, customer will be charged applicable sales tax)

Undersigned agrees that if property or service is used for other than as stated above, he becomes liable for the tax.

CREDIT REFERENCES: (List three - Please give City, State, Phone and Fax #'s)

Table with 3 columns: Company Name, City, State, Phone, Fax

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HOW LONG IN BUSINESS \_\_\_\_\_ ESTIMATED MONTHLY PURCHASE WITH ULS \_\_\_\_\_

OWNER /MANAGER \_\_\_\_\_ CREDIT TERMS \_\_\_\_\_

(with completed credit application, terms will be set at 1% 10, Net 30 days; otherwise terms will be Cash Upon Delivery)

\*MARKETING CLASSIFICATION \_\_\_\_\_ \*UNIVERSAL SALES REP \_\_\_\_\_

Applicant hereby authorizes bank or other grantor of credit, to provide Universal Lubricants information regarding the financial responsibility and indebtedness of said applicant for the express purpose of evaluating the commercial credit request of this applicant and hereby releases the company and any grantor of credit from any claims or causes of action that may arise by reason of the information furnished to Universal by grantor of credit. Applicant further agrees that by signing, he/she understands and agrees that if an open account is established, purchases will be paid according to terms and further agrees to pay 1-1/2 % finance charge on any balance past due. The undersigned official, to induce the granting of credit to the above named firm, hereby personally guarantees the company's credit.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\*Items with asterisk\*will be provided by Universal Sales Representative\*