



Credit Application

P.O. Box 1089*Coldspring, Texas 77331*Ph(936) 653-3249*Fax (936) 653-3172*(800) 525-0508*eastexlab@eastex.net

Business Contact Information			
Company Name: or DBA Name:			Contact Name:
Phone:	Fax:	Company E-mail Address:	
City:	State:	Zip:	Federal Tax ID#: or Social Sec. #:
Date Business Established:	Accounts Payable Name :		Phone #:

Are you a:

CORPORATION If so State of incorporation:

Name, titles and addresses of your three chief corporate officers

PARTNERSHIP

Name and addresses of the partners

SOLE PROPRIETORSHIP

Are you sales tax exempt?

Yes

No

Have you ever had credit with us before?

Yes

No

If yes, under what name?

Bank Information	
Bank Name:	Contact Name:
Title:	Phone Number:
Type of Account(s):	Account Number(s):

Bank Address:
City:
State:
Zip:

Business/Trade References

Company Name:	
Address:	Phone:
City:	Fax:
State:	E-Mail:
Zip:	

Company Name:	
Address:	Phone:
City:	Fax:
State:	E-Mail:
Zip:	

Company Name:	
Address:	Phone:
City:	Fax:
State:	E-Mail:
Zip:	

General Terms, Conditions and Personal Guarantee

1. Credit Terms are Net 30 days, and all invoices become payable in full on the 31st day after Original Invoice Date.
2. I represent that the above information is true, accurate, complete and given to induce Eastex Environmental Laboratory, Inc. (EEL), to extend credit to the applicant. My company and I authorize EEL to make such credit investigation as EEL sees fit, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to EEL any and all information concerning the financial and credit history of my company and myself.
3. The customer agrees to pay all costs of collection or legal fees should such action be necessary due to non-payment. All decisions with respect to the extension or continuation shall be in the sole discretion of the creditor (EEL). The creditor may terminate any credit availability within its sole discretion.
4. **PERSONAL GUARANTEE:** If the customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantees payment for all items purchased on credit by the corporation.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM:

Print Name:	Title:
Authorized Signature:	Date:

For Internal Use Only:

Date Received:		Date Reviewed:		<input type="checkbox"/>	Approved	<input type="checkbox"/>	Declined
Credit Line:	Date:		Approver Signature:				

