

CREDIT APPLICATION

ALL INFORMATION WILL BE HELD IN STRICT CONFIDENCE

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Business Name			Main Phone No.		
Mail Address		Fax No.			
City			Dun & Bradstreet No.		
Corporation (Officer,Name,Title)		Federal Tax ID No.	1	State Tax ID No.	
Additional Officer,Name,Title		Owner's Social Security No.		Years on Business	
Division of:Subsidiary of		Previously in Business as:			
Does Business as (Name,Mailing Address)		Type of Business you conduct:			
(City,State,Zip)		Accounts Payable Contact			
Partnership of		Purchase Order Required	Credit Limit Requested		
Referen					
Bank Name		#1 Supplier's Name			
Street		Street			
City		City		State	Zip
Phone No.	Fax No.	Phone No.		Fax No.	
Account No. Checking or Savings	Contact				
#2 Supplier's Name		#3 Supplier's Name			
Street		Street			
City	State Zip	City		State	Zip
Phone No.	Fax No.	Phone No.		Fax No.	
As an authorized agent for the Credit Application, I give permission to Phoenix Welding Supply to check our credit and I understand Phoenix Welding's terms are Net 30 and hereby agree that any invoice not paid in full within 30 days shall be subject to the maxium legal interest then permitted or an interest charge of 1 1/2% per month whichever is lower. Also, I hereby agree to abide by the cylinder loan agreement and pay customary and prevailing service FINANCE CHARGE on that portion of my balances which become past due on the above basis, and any collection agency or attorney's fees should my account reach this state. Applicant's Applicant's					
Signature		Applicant's			
	FOR COMPANY				
Estimated Gas Usage	Cylinder Usage Charge	Credit Notes/Bank Response			
Estimated Rod Usage	Estimated Misc Usage				
Branch	Salesman				
Approved or Denied	Ву				
Credit Limit	Date				
		(000) 050 4400			

701 South 7th. Street

Phone (602) 253-1108

Fax (602) 258-3187