



CREDIT APPLICATION

SOLD TO/BILL TO/SHIPPING INFORMATION

Official Company Name: _____
 Sold to address: _____ Bill to: (if different) _____ Ship to: (if different) _____

 Main Phone: _____ Main Fax: _____ A/P Fax: _____

BUSINESS INFORMATION

Check One: () Corporation () Partnership () Proprietorship () Subsidiary of or () Division of _____

Years in Operation: _____ Type of Business: _____ Tradestyle: _____

DUNS#: _____ *Please provide us with copies of all tax exemption certificates.*

Principals of Company: _____

Buyer Name: _____
 Buyer Phone: _____
 Buyer e-mail address: _____

Accounts Payable Name: _____
 Accounts Payable Phone: _____
 Accounts Payable e-mail address: _____

URL: _____

TRADE REFERENCES (PREFERABLY METAL RELATED)

Company 1 _____
 Address _____
 Phone _____
 Fax _____

Company 2 _____
 Address _____
 Phone _____
 Fax _____

Company 3 _____
 Address _____
 Phone _____
 Fax _____

Please fax back to:
 Credit Department
 Fax(203)234-7930
 Or e-mail mkrzesik@ulbrich.com

BANK INFORMATION

Name _____ Account # _____
 Address _____
 Phone _____ Fax _____

Please allow 2 business days for processing your application. Applicant understands that Ulbrich's payment terms are 1% 10 days net 30. Applicant also understands that if payment is not made according to those terms, a service and financing charge of 1% per month together with all necessary costs of collections including reasonable attorney fees shall be added to the principal amount.

Name _____ Title _____

Signature _____ Date _____