



Credit Application

Date: _____

Company Name: _____

Type of Business: _____ Date Established: _____

Type of Ownership: Corporation Partnership Individual

Federal ID #: _____ Dun & Bradstreet #: _____

Are Written or Verbal Purchase Orders Required? No Yes If yes, how will Purchase Order number be provided to FSES?

Phone #: _____ Fax #: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Mailing/Billing Address: _____

Contact Person/Title: _____ Phone #: _____

Email Address: _____ Fax#: _____

Accounts Payable Contact: _____ Phone #: _____

Email Address: _____ Fax #: _____

Do you have a parent company? No Yes If yes, provide parent company name and location:

Officer, Owner, Partner Information

(please print)

Name and Title: _____

Name and Title: _____

Name and Title: _____

Bank Reference

Bank Name/Contact: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Email Address: _____

Account Number(s): Checking: _____ Savings: _____ Loan: _____

Trade References

1. Company & Account #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Contact: _____

2. Company & Account #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Contact: _____

3. Company & Account #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Contact: _____

All accounts are COD until a credit application has been completed, reviewed and approved. In consideration for extension of credit, debtor agrees to (1) Credit Terms of NET 30 DAYS from invoice date, and (2) in the event it becomes necessary for creditor to either bring suit or employ a collection agency to aid in the recovery of any debt owed by the debtor, the creditor shall be entitled to recover, in addition to the amount of debt due, all of its costs and attorneys fees. The signature below authorizes FSES to charge interest on outstanding balances OVER 30 DAYS OLD at a rate of 1.5% per month or to the extent permitted by law.

We hereby authorize the above listed Bank and Trade References to release information to Florida Spectrum Environmental Services Inc. (FSES) for use in the evaluation of the credit application.

Signature of Officer* _____ Date: _____

Print Officer Name and Title: _____

*Credit cannot be granted without a signature acknowledging credit terms.

Florida-Spectrum Environmental Services Inc.

1460 West McNab Road • Fort Lauderdale, FL 33309 • Phone: (954) 978-6400 • Fax: (954) 978-2233

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