



Submit to: Progressive Components
 Mail: 235 Industrial Drive, Wauconda IL 60084
 E-mail: billing@procomps.com
 Fax: 1-800-462-6653 or 847-487-1027

CREDIT APPLICATION

Billing Address:

Company _____
 DBA _____
 Street _____
 City _____
 State/Province _____ Zip/Postal Code _____
 Country _____
 Phone _____ Fax _____

Shipping Address (if different):

Street _____
 City _____
 State/Province _____ Zip/Postal Code _____

Additional Shipping Address:

Street _____
 City _____
 State/Province _____ Zip/Postal Code _____

Accounts Payable Contact:

Name _____
 E-mail Address: _____

Invoice Receipt E-mail: _____
 A/P Phone _____ A/P Fax _____

Federal Tax I.D. # _____
If a Canadian company, please specify business number (GST/HST).

Resale Tax # _____

Number of Employees _____

Sole Owner Partnership Corporation

Years in Business _____

Business Type: (Check all that apply)

Principal (Name & Title) _____

Mold Builder Injection Molder Die Casting

Dun & Bradstreet Number (if applicable) _____

Blow Molding Stamping Other: _____

Trade References:

Company Name	Business City, State	Phone & Fax Numbers
		Phone: _____ Fax: _____
		Phone: _____ Fax: _____
		Phone: _____ Fax: _____

Bank Information:

Bank Name _____ City & State _____
 Contact Name _____ Phone _____ Fax _____
 Checking Account Number _____

The above named Company hereby authorizes Progressive Components to make any and all necessary investigations into the credit-worthiness of said Company in order to establish a credit limit.

If approved, applicant (the Company) agrees to adhere to the payment terms of Net 30 days and conditions of sale as stated in the catalog/website and to pay any collection costs incurred to collect the account balance, including reasonable attorney's fees with state of venue being Illinois.

The undersigned, as an inducement to grant credit, warrants that the information submitted is true and correct. Progressive Components is authorized to investigate any credit references.

Authorized Signature _____

Title _____

Date _____