



5607 Palmer Way, Carlsbad, CA 92010 P 760-231-7603 F 760-231-7604
Email: customer@ooly.com

Credit Application

BUSINESS AND CONTACT INFORMATION

Legal Name:

DBA Name (if different from above):

Authorized Officer/Owner:

Title:

Email:

Mailing Address:

City:

State:

ZIP:

Organization type (sole prop, partnership, corporation):

FED EIN:

BUSINESS BANK INFORMATION

Bank name:

Account No:

Bank address:

Bank Officer:

City:

State:

ZIP Code:

Phone:

Fax:

Email:

TRADE REFERENCES

Company name:

Account No:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Account No:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:



5607 Palmer Way, Carlsbad, CA 92010 P 760-231-7603 F 760-231-7604
 Email: customer@ooly.com

Credit Application

Company Name:		Account No:	
Address:			
City:		State:	Zip Code:
Phone:	Fax:	Email:	
Type of Account:			

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice. I agree to pay finance charges of 2% per month (18% annual rate) if the account becomes past due. \$35 will be charged for any returned checks.
2. Claims arising from invoices must be made within seven working days.
3. By signing and submitting this application, you authorize OOLY, LLC to make inquiries into the banking, credit reports and business/trade references that you have supplied.

SIGNATURES

Signature:	Signature:
Printed Name:	Printed Name:
Title:	Title:
Date:	Date:

FOR OFFICE USE ONLY

Account No:	New:	Update:
Territory:		