

CONNEX INDUSTRIAL CORP.

4975 AVALON RIDGE PARKWAY, SUITE 200 NORCROSS, GEORGIA 30071, USA PHONE 770-248-9588, FAX 770-248-9589

CREDIT APPLICATION

(PLEASE PRINT OR TYPE)

APPLICANT (BUSINESS OR CORPORATE NAME)					ACCOUN	ACCOUNTS PAYABLE E-MAIL ADDRESS					
BUSINESS STREET ADDRESS					BILLING ADDRESS (STREET OR P.O. BOX)						
CITY	STATE		ZIP		CITY			STATE	<u> </u>	ZIP	
BUSINESS PHONE #			/ SOLE PRO		RIETOR	IF INCORPORATED IN STATE OF: DUNS NUMBER:		FINANCIAL STATEMENT / WILL BE MAILED / ENCLOSED / DECLINED			
BUSINESS FAX # NO. OF EMPLOYEE			ES	/ CORPORATI							
PRINCIPAL BUSINESS ACTIVITIES			/ C	SINESS BLDG IS:		(If yes, expl		RSHIP CHANGED IN THE LAST 2-5 YRS? ain on separate sheet of paper) YES / NO			
OWNERS (IF APPLICAL	NT IS A S	OLE PROPRIET	ORSH	IP) OR OFFICER	S (IF A COR	PORATION)					
NAME	TITLE			HOME ADDRESS			HOME PHONE NO.				
		SS#									
NAME		TITLE			HOME ADDRESS				HOME PHONE NO.		
		SS#									
BANK OR SAVINGS A	ND LOA	N ASSOCIATION	ON								
CONTACT NAME & PHONE # BANK NAME				DRESS	ACCOUNT NUME		OUNT NUMBE	R	R TYPE OF ACCOUNT		
APPLICANT'S PRINCIPA	AL U.S. SU	JPPLIERS (F	Please	note: Complete ad	dresses and	fax numbers a	re necessary so	that we c	an proce	ess your application promptly)	
CONTACT PERSON	NY NAME	Y NAME ADDRESS						PHONE			
								FAX			
CONTACT PERSON COMPA		PANY NAME		ADDRESS				PHONE			
CONTACT PERSON	COMPA	COMPANY NAME		ADDRESS			FAX PHONE				
CONTACT LICCON	OOWII A	INT INAME		ADDITEOU			FAX				
CONTACT PERSON	COMPA	NY NAME		ADDRESS				PHONE			
								FAX			
agrees to pay for the good of that Connex Ind. Corp. I made on all sums due Corp attorney, the Applicant ago information concerning the	Is and sent to the app nnex Ind. (rees to pay Applican guarantee	vices received fro licant. Applicant a Corp., which have y all collection an t at any time and s with his/their pe	om Cor acknov e not b d attor from a ersona	nnex Ind. Corp. in ac wledges that a late p leen paid according mey fees in addition any source. Applican I assets for all paym	cordance with pay charge of \$ to terms. Shou to all other su at also acknow	our terms and 6200.00 dollars ald it become n ms due. Applicately deges that, in	conditions. Appl will be applied pecessary to place ant authorizes Control to a control to the conditions.	icant agre promptly a se the acco connex Ind prrection b	es to ea nd a mo ount with I. Corp. t ecoming	the Applicant, the applicant the of the terms and conditions on the charge of 2% shall be a collection agency or to obtain credit and financial g necessary, the owner(s) of above agreement has been	
WE ESTIMATE OUR ANNUAL	L PURCHAS	SING AT:	_								
AND REQUEST A CREDIT LINE				PRINT NAME OF APPLICANT (Officer or Owner) TITLE							
				SIGNATURE OF APPL		mint Oc.	DATE				
				or use by Coni		-	ιτιΟΠ				
Client ID:					Credit Ter	Credit Terms:					
Signature: Date:						e:					

(Rev. 10-01-09)