



CREDIT APPLICATION

ACCOUNT #

COMPANY NAME _____

STREET / MAILING ADDRESS _____

CITY STATE ZIP _____

*** EMAIL ADDRESS FOR ACCOUNTS PAYABLE - IMPORTANT***

**** BUYER: NAME AND EMAIL ADDRESS - IMPORTANT****

ACCOUNTS PAYABLE CONTACT PERSON

TELEPHONE AND EXT #

FAX

RESALE NUMBER

FEDERAL ID NUMBER

FORM OF ORGANIZATION: CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP

NATURE OF BUSINESS _____ YEARS: IN BUSINESS _____ AT PRESENT ADDRESS _____

SHIP TO ADDRESS _____

CITY STATE ZIP _____

CREDIT REFERENCES: 4 REFERENCES REQUIRED FOR PROCESSING

COMPANY NAME	CITY, STATE, ZIP	FAX#	PHONE#
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____
4 _____	_____	_____	_____

BANK REFERENCE

(INCLUDE BANK NAME, BRANCH, CONTACT & TELEPHONE)

1 _____

PRINCIPALS OF COMPANY

(INCLUDE NAME, TITLE, HOME PHONE)

1 _____

2 _____

NOTICE: THE FOLLOWING IS PROVIDED FOR YOUR INFORMATION. PLEASE SIGN ONLY AFTER READING CREDIT AGREEMENT.

I agree:

- To pay each invoice within thirty (30) days, unless otherwise specified under terms of sale.
- To pay 2% per month service charge on account balances over thirty (30) days.
- To pay any and all collection costs/fees in the event collection efforts become necessary.

My signature confirms that the information contained here is complete and accurate to the best of my knowledge.

APPROVED BY
DATE
CREDIT LINE

AUTHORIZED SIGNATURE PRINT NAME/TITLE DATE

Seattle Sports Company, Inc.
 3217 W. Smith Street #1 - Seattle WA 98199
 Tel: (206) 782-0773 - 1-800-632-6163 - Fax: (206) 782-0651
Manufacturers of Quality Outdoor Gear