



Nordon, LLC, One Cabot Blvd East, Langhorne, PA 19047 215 504-4700 [www.nordoninc.com](http://www.nordoninc.com)

## **CREDIT APPLICATION**

***Please fill out the application in its entirety in order to expedite the credit process.***

For your convenience, we accept most major credit card payments.

Date: \_\_\_/\_\_\_/\_\_\_

Credit Line Requested: \$ \_\_\_\_\_

Cooperating Dealer/Broadliner: \_\_\_\_\_

Estimated Annual Purchases: \$ \_\_\_\_\_

### **BUSINESS INFORMATION:**

Legal Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_ FAX: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Business:     \_\_\_ Corporation     \_\_\_ Partnership     \_\_\_ Sole Proprietorship     \_\_\_ Non Profit

Status of Practice/Business:     \_\_\_ New     \_\_\_ Established     \_\_\_ Years in Business

Tax Exempt:     \_\_\_ Yes \_\_\_ No     Tax Exempt #: \_\_\_\_\_

Owner/Principal: \_\_\_\_\_ SS#: \_\_\_\_\_

Home Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Owner/Principal \_\_\_\_\_ SS# \_\_\_\_\_

Home Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Owner/Principal \_\_\_\_\_ SS# \_\_\_\_\_

Home Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

**BANK AND TRADE RELATIONSHIPS:**

Primary Bank: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Bank Officer: \_\_\_\_\_ Account#: \_\_\_\_\_

**TRADE REFERENCES:**

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

In consideration for credit being extended, I or we acknowledge and agree to the following: (1) Payment is jointly, severally and unconditionally guaranteed within 30 days of date of delivery, or unless other Terms are agreed upon; (2) any charges unpaid after the above 30 days are to be increased by 1.5% per month; (3) any charges still outstanding after 90 days from date of delivery are subject to collection, and all collection or arbitration expenses, attorney's fees, and court costs will be borne by the purchaser; (4) title to all work shall remain with the creditor until all invoices and additional charges have been paid in full; (5) all claims, requests for adjustments, or notification of errors must be made within thirty days, or charges are considered accepted; (6) this agreement shall apply to all current and future charges unless revocation is received by registered mail; (7) credit privileges may be withdrawn at any time without invalidating the terms of this agreement.

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**CREDIT CANNOT BE EXTENDED UNTIL THIS FORM IS COMPLETED AND VERIFIED**

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Title: \_\_\_\_\_

***Please fax back to the Nordon Credit Dept. at 215-486-5435***

For questions and credit card details, please contact Melissa Delgado at 215-504-4700, ext. 216 or 267-594-4017

