



ph: 503.557.7000 or 1.800.274.4171 fx: 503.557.7007 • www.craftsmanlabel.com

Thank you for your interest in Craftsman Label. Please fill out the following form, sign and fax it back to us.

Business Name:	Federal Tax ID	
Legal Business Name (if different)		How long in Business?:
Business Address:		
City:	State:	Zip:
Mailing Address:		
City:	State:	Zip:
Shipping Address:		
City:	State:	Zip:
Business Contact:	Phone:	Fax:
Type of Business:		
Corporation: Partnership:		
Name:	Position:	
Name:	Position:	
Name:	Position:	
TRADE REFERENCES: Please list only the more and a credit limit equal to or greater the	•	cinuing relationship of 1 year or
Firm:Add	ress:	
Contact Person:	Telephone	Fax:
Firm:Add	ress:	
Contact Person:		
BANK REFERENCES		
Bank Name:	Branch Address:	
Contact Person:	Telephone	Fax:
Type of Account: Checking S	avings: LOC	Other:

CRAFTSMAN LABEL APPLICATION FOR CREDIT (continued)

CREDIT POLICY

PAYMENT TERMS:

Prior to approval for credit, all sales are considered C.O.D. as per the invoice value. After the credit is granted, the payment terms are based on the type of credit terms approved by Craftsman Label Inc.

SERVICE CHARGE ON PAST DUE ACCOUNTS:

Applicant agrees to pay service charge of one percent per month (which is annual percentage rate of 12%) on all past due balances.

COLLECTION CHARGES:

In the event that collection efforts become necessary, applicant agrees to pay Craftsman Label, Inc. collection cost, including attorney's fees and costs.

AGREEMENT:

By signing below, the undersigned represents and agrees as follows:

- the information provided in this application is true, complete and correct.
- the trade and bank references listed above may release to Craftsman Label, Inc. such information as is necessary for Craftsman Label to verify the accuracy of the information provided by applicant and
- to be bound by the Credit Policies set forth above (i.e. payments terms, service charge on past due accounts, and collection charges).

Signature:	Date:
Print Name:	Title:
Signature:	Date:
Print Name:	
FOR OFFICE USE	
Credit Approved	Credit Denied
Date:	Credit Limit
Terms:	