Business Account & Credit Application



 ${\bf Contact: Ethan \ Wheeler \ | Business \ Development \ Mgr.}$

M: 732-314-1106 | sterlingeww@gmail.com

Company Name:

Primary Business Address:

1105 Green Grove Road, Neptune, New Jersey 07753 O: 732-918-8004 | sterlingseal.com

TIN / State Reseller Cert / Tax ID #

BUSINESS INFORMATION

Website:

Length of time at address:

City:		State:	Zip:	,	· · · · · · · · · · · · · · · · · · ·		
Formation Type: Circle One Sole	e proprietorship LLC/LLP	Corporation	Other				
Business Model: Circle One Online Only Retail Store & Online Retail Store			Store Only	# Locations:			
Store Location:		Lease / Own	Renewable Y/N	Lease End Date:			
City:		State:	Zip:	Annual Revenue:			
How did you hear about us? Circle Applicable: Radio TV Vendor/Supplier Retail Store Online Retail YouTube LinkedIn Facebook Other							
Anticipated Sterling Seal Product	Sales:		Units:				
Product Category Interest: Circle Applicable: Balls, Belts, Ceramic Products, O-Rings, Fasteners, Filters, Gaskets, PTFE Products, Packing, Safety							
Is there a specific product you wish to carry?							
Where will you sell? Circle Applicable: Company Website / Company Store / Local Retailer / Chain Retailer / Online platform							
Name retail outlet(s) you sell to:							
Name online platform(s) you sell on:							
Ready to Order: Circle One: Immediately / 1-2 Months / 3-4 Months / 6+ Months / Never, I just like filling out applications							
CONTACT INFORMATION							
Point of Cor	Phone		Email				
Representative:							
Shipping & Receiving:							
Accounting:							
Principle:							
BUSINESS/TRADE REFERENCE							
Contact	Phone/email		Company	Relationship	Time Acquainted		
1							
2							
3							
Dunn & Bradstreet ID #	Notable	Notable Memberships:					

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Fill out below section to request a line of credit

BUSINE	SS AND CREDIT INFO	RMATION		
Registered Company Address:		Date of Formation:		
City:	State:	ZIP Code:		
Registered Agent:	Phone: Email:			
Bank name:	Bank address:			
Account Type: Check one Checking Savings Other	City:	State:	Zip Code:	
Account #	Internal Use Only: Terms Granted:	P.A. C.O.D. 50)/50 Net 10 Net 30	
P.A. = Pay in Advance to shipping C.O.D. = Cash On Delivery	50/50 = 50% Advance Payment 5	Payment 50% Invoiced Net 10 Net 10 / Net 30 = Deferred payment 10 or 30 Days		
 Accounts that are habitually late with payments may los will convert to a C.O.D. only account or be requested to Any claims that arising from invoices must be made with By submitting this application, you authorize Sterling Sethat you have supplied. 	make payment in advanc hin five working days.	e prior to shipment of p	goods until credit can be reestablished	
Representative				
Signature:	Title:		Date:	
Accounting				
Signature:	Title:		Date:	
Principle				
Signature:	Title:		Date:	

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