

# Metal Master Sales Corporation

## Application for Credit

Company Name \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

We request a credit account for an average monthly purchase of \$ \_\_\_\_\_ Federal ID# \_\_\_\_\_

**PLEASE ATTACH SALES & USE TAX EXEMPTION CERTIFICATES.**

### General Information

Type of Business \_\_\_\_\_

Date Established \_\_\_\_\_

Corporation \_\_\_ Partnership \_\_\_ Proprietorship \_\_\_

### Bank Credit References

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Acct # \_\_\_\_\_

### Financial Information

For Credit Line in excess of \$25,000, attach most recent Audited financial statements.

### Trade Credit References

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

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Applicant understands that the above information is provided for the purpose of obtaining credit and is warranted to be true. We hereby authorize the above Bank and Trade References to release information pertaining to our credit and financial responsibility. Further, if necessary, to secure payment of proper charges, we agree to pay all reasonable collection fees, legal fees, court costs and finance charges permitted by law.

Signed: \_\_\_\_\_

**Owner/Partner/Company Officer**

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

Printed Name: \_\_\_\_\_

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

# Metal Master Sales Corporation

1159 N. Main Street, Glendale Heights, IL 60139  
Telephone 630-858-4750 Fax 630-858-0417

## Sales And Use Tax Exemption Certificate

\_\_\_\_\_  
Purchaser Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State

\_\_\_\_\_  
Zip

The undersigned certifies that the products to be purchased from Metal Master Sales Corporation in the subject state are exempt from Sales and Use Tax of that state for the following reasons:

1. \_\_\_\_\_ For Resale
2. \_\_\_\_\_ Product(s) purchased will become and ingredient or component of articles manufactured or produced for sale.
3. \_\_\_\_\_ I am a common carrier. My I.C.C. or certificate of conveyance number is \_\_\_\_\_
4. \_\_\_\_\_ Other reasons for Sales Tax Exemption – Explain in detail

\_\_\_\_\_  
\_\_\_\_\_  
( ) This is a blanket certificate covering all purchases to remain in effect until cancelled.

( ) This is a unit certificate covering only those purchased covered by Purchase Order \_\_\_\_\_ or invoice # \_\_\_\_\_

Complete one:

1. \_\_\_\_\_ I am exempt from the sales tax on all products purchased
2. \_\_\_\_\_ I am exempt from sales tax on only the following products. (List Products).

\_\_\_\_\_  
\_\_\_\_\_  
My sales tax license registration or permit number is  
State \_\_\_\_\_ No. \_\_\_\_\_

When a registration number is not provided, an explanation is required: \_\_\_\_\_  
\_\_\_\_\_