

15 Catamount Drive, Milton, VT 05468 802-864-0723 – Fax 802-891-1036 , kcrook@villanti.com

## **Credit Application**

The following information is submitted for your consideration as a basis of extension of credit to us.					
Business nar	me:	Telephone:			
Street Addre	ess:	FED ID#			
City:	Sta	State:		Zip:	
	siness: Type of Business: nel (Owners, Purchasing, Payables, Etc.) Name		_	Proprietorship	
1.					
2.					
3.					
Sales Tax:	Taxable Non-Taxable	Financial States	ments Available:	Yes No	
Exemption (	Certificate Attached?Yes	No			
Trade refere Nar 1.	nces that are presently extending credit: me Address		Phone#	Fax Number	
2.					
3.					
4.					
<ol> <li>We understand and agree to Villanti &amp; Sons, Printers, Inc. terms of sale as follows:</li> <li>Standard Terms are NET UPON RECEIPT unless specific arrangements have been made in advance.</li> <li>A finance charge of 1 1/2 % per month, 18% per annum will be charged on any balance over 30 days.         Payments will always be credited against any existing finance charge first and the balance to the account.     </li> <li>Client agrees to pay all reasonable costs of collection and attorney's fees.</li> </ol>					
CREDIT: All orders subject to acceptance by Credit Department. No orders will be shipped on open account unless credit application has been made and satisfactorily approved by Credit Department. Credit accommodation may be withdrawn in the event of delinquency.					
Permission i Submitted by Signature: _		se any information	to expedite processi	ing this application.	
	Authorized Signature	Title	;	Date	