

NEW CUSTOMER ACCOUNT INFORMATION

Legal Entity Name:				
Trade Names:				
Phone Number:			Email:	
Bill to Address:				
Street Address:				
City, State, Zip Code:				
Ship to Address:				
Street Address:				
City, State, Zip Code:				
Phone Number:			Email:	
Date of Business Established:			_	
Date Under Current Ownership:				
Federal Tax ID Number:			Dun & Bradstreet:	
Copy of Tax Certificate Enclosed:			NAICS Code:	
Company Officers:				
President:	CFO:		Controller:	
Phone Number:		Email:		
Purchasing Contact:				
Title:	Name:			
Phone Number:		Email:		
Accounts Payable Contact:				
Title:	Name:			
Phone Number:		Email:		
Name of Parent/Holding Company:				
Street Address:				
City, State, Zip Code:				
·		Email:		

Bank Name: Contact: Street Address: City, State, Zip Code: Phone Number: Email Address: **Credit References:** Contact: Company Name: Street Address: City, State, Zip Code: Phone Number: Email Address: ___ Company Name: _____ Contact: ____ Street Address: City, State, Zip Code: _____ Phone Number: Email Address: Contact: ____ Company Name: Street Address: City, State, Zip Code: Phone Number: Email Address: Amount of Credit Request: _____ Annual Potential Sales: _____ Email Address: Dynapar Territory Manager: (Information can be found at on our website here) Phone Number: Customer Type (To be Completed by Dynapar Territory Manager): ☐ Distributor (Gold) ☐ Distributor (Silver) Distributor (Bronze) System Integrator MRO We have reviewed and agree to adhere to the attached Dynapar Corporation's standard terms and conditions of sales and returned goods. We also agree to pay for any costs incurred if outside collection efforts become necessary. Furthermore, in connection with our ability to do business on credit terms, I authorize my bank and credit references to release information concerning my account to Dynapar Corporation and its affiliates. Date: Signature: Print Name: Title:

Banking Information:



REQUEST FOR BANK REFERENCE

DATE:			EMAIL:		
COMPANY:					
ATTENTION:					
RE:					
The above refere you would share neld in strict con	nce organization has on their Credit History wifidence.	given your name th us. Please be	as a Credit Ref assured that a	erence. We wou Il information re	ıld appreciate if ceivevd will be
FEDER	AL TAX ID NUMBER: _				
	ACCOUNT NUMBER: _				
DATE	ACCOUNT OPENED: _				
	CCT AVG BALANCE:				
	NS SATISFACTORY:	YES	□ NO		
	NSF:	YES	☐ NO		
COMMENTS:					

Thank you for your time and information,
PLEASE EMAIL YOUR RESPONSE TO: CREDIT.REQUESTS@DYNAPAR.COM



REQUEST FOR CREDIT REFERENCE (1 of 3)

DATE:	EMAIL:
COMPANY:	

share their Credit History with us. Pl	s given your name as a Credit Reference. We would appreciate if you would ease be assured that all information receivevd will be held in strict confidence.
DATE OF FIRST SALE	:
	:
	:
	<u> </u>
	:
	:

Thank you for your time and information,
PLEASE EMAIL YOUR RESPONSE TO: CREDIT.REQUESTS@DYNAPAR.COM



2100 W. Broad St.
Elizabethtown, NC 28337
Legal Entity: Dynapar Corporation
REQUEST FOR CREDIT REFERENCE (2 of 3)

DATE:	EMAIL:
COMPANY:	

	our name as a Credit Reference. We would appreciate if you would share their all information receivevd will be held in strict confidence.
DATE OF FIRST SALE:	

Thank you for your time and information, PLEASE EMAIL YOUR RESPONSE TO: CREDIT.REQUESTS@DYNAPAR.COM



2100 W. Broad St.
Elizabethtown, NC 28337
Legal Entity: Dynapar Corp REQUEST FOR CREDIT REFERENCE (3 of 3)

DATE:		
COMPANY:		

		ne as a Credit Reference. We would appreciate if you would share their ormation receivevd will be held in strict confidence.
DATE OF	FIRST SALE:	
	CREDIT LIMIT:	
AMOUNT PRESE	ENTLY OWED:	
AMOUN	IT PAST DUE:	
AVERAGE [DAYS TO PAY:	

Thank you for your time and information, PLEASE EMAIL YOUR RESPONSE TO: CREDIT.REQUESTS@DYNAPAR.COM



CUSTOMER FILE (INTERNAL ONLY)

Customer Name:			
Customer Address:			
Street Address:			
City, State, Zip Code:			
Phone Number:		Email:	
DATE CREDIT APPLICATION R	RECEIVED:		
DATE CREDIT APPLICATION AF			
DUN & BRADSTREET REPORTING (I			
TRADE REFERENCES:			
TAX EXEMPT CERTIFICATE (BLANK	ET OR RESELLERS):	YES	□ NO
CREDIT LIMT EXTENDED:		PAYMENT TERMS:	
PROJECTED SALES :	ANNUAL		
	MONTHLY		
PRELIMINARY APPROVAL:		DATE:	
FINAL APPROVAL:		DATE:	