



CORPORATE OFFICE:  
2140 HUTSON RD  
GREEN BAY, WI 54303-4789

Phone: (800) 289-9253  
Fax: (920) 494-1440

Please email completed agreement to [ar@fairchildequipment.com](mailto:ar@fairchildequipment.com).

#### FAIRCHILD EQUIPMENT, INC. CREDIT APPLICATION AND AGREEMENT

**PO REQUIRED:** \_\_\_\_ **YES** \_\_\_\_ **NO** Tax Exempt: \_\_\_\_ YES \_\_\_\_ NO # YEARS IN BUSINESS: \_\_\_\_

LEGAL BUSINESS NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

BILL TO ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SHIP TO ADDRESS IF DIFFERENT: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**PREFERRED EMAIL ADDRESS FOR ELECTRONIC INVOICE BILLING:** \_\_\_\_\_

**AP CONTACT:** \_\_\_\_\_

#### BUSINESS ENTITY (CHECK ONE)

COMPANY ENTITY: \_\_\_\_ CORP. \_\_\_\_ PARTNERSHIP \_\_\_\_ L.L.C. \_\_\_\_ SOLE PROPRIETOR

FEIN #: \_\_\_\_\_ ANNUAL SALES: \$ \_\_\_\_\_

#### IF APPLICANT IS A SUBSIDIARY, PROVIDE THE FOLLOWING INFORMATION ON THE PARENT COMPANY

NAME: \_\_\_\_\_ DATE OF INCORPORATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DUNS#: \_\_\_\_\_ NATURE OF THE BUSINESS: \_\_\_\_\_

#### COMPANY DIRECTORS/OFFICERS/PRINCIPAL

OWNER/OPERATOR NAME(S): \_\_\_\_\_

IF THE SAME LEAVE BLANK

PRINCIPAL NAME(S): \_\_\_\_\_ TITLE: \_\_\_\_\_

PRINCIPAL NAME(S): \_\_\_\_\_ TITLE: \_\_\_\_\_

#### ESTIMATED PURCHASES

**MONTHLY \$:** \_\_\_\_\_ **ANNUALLY \$:** \_\_\_\_\_

#### BANKING DETAILS

BANK NAME: \_\_\_\_\_

BANK CITY AND STATE: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**TRADE REFERENCE DETAILS**

VENDOR 1: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
CITY, STATE: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

VENDOR 2: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
CITY, STATE: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

VENDOR 3: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
CITY, STATE: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**FOR PROPRIETORS, PARTNERS, AND CORPORATIONS IN THE U.S.**

**REQUIRED SIGNATURE DISCLOSURE:** BY THE SIGNATURE OF THE APPLICANT (OFFICER, PRINCIPAL, OWNER, PARTNER, CONTROLLER), YOU HEREBY AUTHORIZE FAIRCHILD EQUIPMENT, INC. TO RUN A FULL INVESTIGATION OF YOUR CREDIT HISTORY INCLUDING, BUT NOT LIMITED TO, OBTAINING COMMERCIAL AND/OR CONSUMER CREDIT REPORTS. WE UNDERSTAND THAT FAIRCHILD EQUIPMENT, INC. HAS ALL RIGHTS TO REGULATE CREDIT TERMS AND LIMITS AT ANY TIME.

APPLICANT'S SIGNATURE: **X** \_\_\_\_\_ DATE: \_\_\_\_\_

**PERSONAL GUARANTEE**

NOTE: IF YOUR BUSINESS IS IN OPERATION LESS THAN TWO YEARS, AND WOULD LIKE TO BE CONSIDERED FOR TERMS, A PERSONAL GUARANTEE WILL BE REQUIRED AND SENT CONTINGENT UPON A FULL CREDIT REVIEW, AND WHEREAS OTHERWISE DEEMED APPROPRIATE (I.E., POOR CREDIT SCORE).

**PLEASE PROVIDE THE EMAIL ADDRESS FOR A PERSONAL GUARANTEE SIGNATURE:** \_\_\_\_\_

**STANDARD CONDITIONS -TERMS ARE NET 10 DAYS OR COD UPON CREDIT APPROVAL**

TERMS OF SALE, INCLUDING TERMS OF PAYMENT AND CHARGES, FOR EACH PURCHASE ARE AGREED TO BE THOSE SPECIFIED ON THE FACE OF EACH INVOICE. THE CUSTOMER HEREBY AGREES TO PAY ALL COSTS OF COLLECTION OR LEGAL FEES INCLUDING REPOSSESSION AND STORAGE FEES; SHOULD SUCH ACTION BE NECESSARY DUE TO NON-PAYMENT. THE ABOVE INFORMATION IS WILLINGLY SUPPLIED AND THE CREDITOR IS AUTHORIZED TO CONTACT THE ABOVE BANK AND TRADE REFERENCES IN ORDER TO ESTABLISH THE CREDITWORTHINESS OF THE ABOVE NAMED COMPANY. THE CREDITOR IS ALSO AUTHORIZED TO OBTAIN CREDIT REPORTS ON THE PROPRIETORS, PARTNERS OR PRINCIPALS IF DEEMED NECESSARY FOR CREDIT APPROVAL. SHOULD CREDIT AVAILABILITY BE GRANTED BY THE CREDITOR, ALL DECISIONS WITH RESPECT TO THE EXTENSION OR CONTINUATION SHALL BE IN THE SOLE DISCRETION OF THE CREDITOR. THE CREDITOR MAY TERMINATE ANY CREDIT AVAILABILITY WITHIN ITS SOLE DISCRETION.

**THE TERMS AND CONDITIONS OF THIS CREDIT APPLICATION WILL BE PERPETUAL TO ANY FUTURE TRANSACTIONS BETWEEN THE GRANTOR AND GRANTEE.**

**I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM.**

**Our terms of payment: N10**

**APPLICANT'S NAME:** **X** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**APPLICANT'S SIGNATURE:** **X** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**FOR INTERNAL USE ONLY:**

DATE APPLICATION RECEIVED: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

ENTERED BY: \_\_\_\_\_

TERMS: \_\_\_\_\_