

Salesman Number: _____ Acct.: # ____

(281)476-8500 • FAX (281)476-8525

	CREDIT APPLICATIC	N Taxable Non-Taxable
Individual or		
Company Name:		Date:
Bill To:	City:	State: Zip:
Street Address	City	State Zip
Phone Number	Fax #	
A/P Contact:	Phone:	
A/P Email:		
		Individual: Years in Business:
Banking Information: Check Bank:	0	Phone No.:
Business References (Please Prov	vide At Least 3 References)	
1. Company Name:	Р	hone:
Fax or Email:		
		hone:
Fax or Email:		
		hone:
Fax or Email:		
In making this application for credit through business references. I understar		nsumer report whereby information is obtained uest within a reasonable period of time to receive
Signed:	Title:	Date:
For Credit Department Use On	ly:	
Credit OK: Credit Li	imit: Amount of orde	er placed: \$
	on: Signed:	



317 Georgia Avenue • Deer Park, TX 77536 (281)476-8500 • FAX (281)476-8525

We appreciate the opportunity to do business with your company and look forward to a mutually profitable business relationship.

In order to avoid any misunderstanding in the future, please read and acknowledge our terms for doing business. We will activate your credit account upon receipt of acknowledgement.

Our terms are as follows:

- 1. Payment is due within 30 days of the invoice date.
- 2. All invoices will be mailed within one business day of the shipment. We do not issue monthly statements.
- 3. All invoices paid after 30 days are considered past due and are subject to a 1% interest charge on all outstanding balances per month (minimum of \$5 per invoice).
- 4. After a failure to pay invoices with 91 days, we reserve the right to turn your account over to a collection agency of our choice.
- 5. Any discrepancies as far as production or quality of work is concerned should be brought to our attention in writing no more than 15 days after the material is received. We reserve the right to charge a restocking fee on returned material, depending on the inventory.

Any deviation from these terms must be approved in writing by our General Manager. Please note that these are only approved on a case-by-case exception basis.

If you have any questions concerning these terms or any other questions about our business, please contact us at 281-476-8500.

AKNOWLEGMENT AND ACCEPTANCE NOTIFICATION

The authorized person, on behalf of the company, agrees to comply with these terms as listed above on this page.

Printed Name_____

Company Name

Title _____

Please fax back to 281-476-8525 or email to asp.receivables@ameraflex.com



Ameraflex Ameraflex Sealing Products Co., Inc.

Customer Information Form

Customer Name:	<u></u>				
Customer Address 1:					
Customer Address 2:					
City:			ovince State:	Zip:	
Website/E-mail:			unty:		
Phone Number:		Fax	Fax:		
Tax Exempt Number: (Attach copy of certificate)		Pre	ferred Shipping Carrier:		
Purchasing Contact:		Em	ail:		
Accounts Payable Contact:		Em	ail:		
Sales person you are working with:					
Can invoices be emailed	Yes	No	Email:		
Do you require Order Acknowledgements?	Yes	No	Email:		
Do you require Statements?	Yes	No	Email:		
Do you allow backorders?	Yes	No			
Do you allow partial shipments?	Yes	No			
Do you have a different Ship-to address?:					
Customer Ship to Address1:					
Customer Ship to Address2:			ovince		
City:			State:	Zip:	••••••••••••••••••••••••••••••••••••••
Country:		Count	у:		
Any additional comments or special instructio	ons you w	vould like t	us to consider		

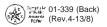


Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit	Phone (Area code and number)
Address (Street & number, P.O. Box or Route number)	
City, State, ZIP code	
Texas Sales and Use Tax Permit Number (must contain 11 digits)	
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico	
(Retailers based in Mexico must also provide a co	by of their Mexico registration form to the seller.)

I, the purchaser named above, claim the right to make items described below or on the attached order or invol		kable
Seller:		
Street address:		
City, State, ZIP code:		
Description of items to be purchased on the attached orde	r or invoice:	
Description of the type of business activity generally engage	ged in or type of items normally sold by the purcl	haser:
The taxable items described above, or on the attached geographical limits of the United States of America, its te Mexican States, in their present form or attached to other ta	rritories and possessions or within the geograph	
I understand that if I make any use of the items other than rete I must pay sales tax on the items at the time of use base period of time used.		
I understand that it is a criminal offense to give a resale ce are purchased for use rather than for the purpose of resale, may range from a Class C misdemeanor to a felony of the	, lease or rental, and depending on the amount of	
sign Purchaser	Title	Date

This certificate should be furnished to the supplier. Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.



Texas Sales and Use Tax Exemption Certification

This certificate does not require a number to be valid.

Name of purchaser, firm or agency		
Address (Street & number, P.O. Box or Route number)		Phone (Area code and number)
City, State, ZIP code		
I, the purchaser named above, claim an exemption fro items described below or on the attached order or invo		se taxes (for the purchase of taxable
Seller:		
Street address:	City, State, ZIP	code:
Description of items to be purchased or on the attached or	der or invoice:	
Purchaser claims this exemption for the following reason:		
I understand that I will be liable for payment of all state and the provisions of the Tax Code and/or all applicable law.	local sales or use taxes which	may become due for failure to comply with
l understand that it is a criminal offense to give an exemption ce will be used in a manner other than that expressed in this certific from a Class C misdemeanor to a felony of the second deg	cate, and depending on the amo	
Purchaser here	Title	Date
NOTE: This certificate cannot be issued for THIS CERTIFICATE DOES NOT REQUIRE Sales and Use Tax "Exemption Numbers" of	A NUMBER TO BE VALID.	

This certificate should be furnished to the supplier. Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.