



Ameraflex Sealing Products Co., Inc.

317 Georgia Avenue • Deer Park, TX 77536

(281)476-8500 • FAX (281)476-8525

CREDIT APPLICATION

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: _____

Company-Type of Ownership: Corporation: Partnership/LLC: Individual: Years in Business: _____

Banking Information: Checking Savings

Bank: _____ Officer: _____ Phone No.: _____

Business References (Please Provide At Least 3 References)

1. Company Name: _____ Phone: _____

Fax or Email: _____

2. Company Name: _____ Phone: _____

Fax or Email: _____

3. Company Name: _____ Phone: _____

Fax or Email: _____

WE UNDERSTAND YOUR TERMS AND AGREE TO ABIDE BY THEM.

In making this application for credit I authorize you to make an investigation consumer report whereby information is obtained through business references. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigative consumer report.

Signed: _____ Title: _____ Date: _____

For Credit Department Use Only:

Credit OK: _____ Credit Limit: _____ Amount of order placed: \$ _____

Credit Refused: _____ Reason: _____ Signed: _____ Date: _____

Salesman Number: _____ Acct.: # _____



Ameraflex Sealing Products Co., Inc.

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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.

AKNOWLEDGMENT AND ACCEPTANCE NOTIFICATION

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

Signature _____

Printed Name _____

Company Name _____

Title _____

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



Ameraflex Sealing Products Co., Inc.

Customer Information Form

Customer Name: _____

Customer Address 1: _____

Customer Address 2: _____

City: _____ Province or State: _____ Zip: _____

Website/E-mail: _____ County: _____

Phone Number: _____ Fax: _____

Tax Exempt Number: _____ Preferred Shipping Carrier: _____
(Attach copy of certificate)

Purchasing Contact: _____ Email: _____

Accounts Payable Contact: _____ Email: _____

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: _____

City: _____ Province or State: _____ Zip: _____

Country: _____ County: _____

Any additional comments or special instructions you would like 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)													
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> </tr> </table>													
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico													
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 250px; height: 15px;"></td> <td style="padding-left: 10px;">(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)</td> </tr> </table>			(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)										
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I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:

Seller: _____

Street address: _____

City, State, ZIP code: _____


Description of items to be purchased on the attached order or invoice:

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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This certificate should be furnished to the supplier.
Do not 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 from payment of sales and use taxes (for the purchase of taxable items described below or on the attached order or invoice) from:

Seller: _____


Street address: _____ City, State, ZIP code: _____

Description of items to be purchased or on the attached order or invoice:

Purchaser claims this exemption for the following reason:

I understand that I will be liable for payment of all state and local sales or use taxes which may become due for failure to comply with the provisions of the Tax Code and/or all applicable law.

I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

**This certificate should be furnished to the supplier.
Do not send the completed certificate to the Comptroller of Public Accounts.**