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# Worldwide Supply, LLC

FORM REVISION B  
Document Control Number: QF-006

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## CREDIT APPLICATION (Confidential)

COMPANY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

DBA: \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

FEDERAL TAX ID NUMBER: \_\_\_\_\_

CORPORATION       PARTNERSHIP       PROPRIETORSHIP       OTHER \_\_\_\_\_

Is your Company      Privately held       or      Publicly Traded       Stock Symbol \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Is your Company       Tax Exempt      or       Reseller

If your Company is Tax Exempt please provide us with the Tax Exemption Certificate or if your Company is a Reseller then please provide us with a Resale Certificate. A Seller's Permit will not take the place of a Tax Exemption Certificate or a Reseller's Certificate. Please notify your Salesperson if you require a blank resale Certificate to fill out. Taxes will be charged to your account without this information.

ACCOUNTS PAYABLE CONTACT \_\_\_\_\_ TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

### **COMPANY DIRECTORS/OFFICERS/PRINCIPALS – (FOR PARTNERSHIPS & SOLE PROPRIETORS ONLY)**

NAME 1 \_\_\_\_\_ SS \_\_\_\_\_

HOME STREET ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME 2 \_\_\_\_\_ SS \_\_\_\_\_

HOME STREET ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

### **Please provide recently audited financial statements**

ANY LEGAL ACTION PENDING? YES       NO

ANNUAL US DOLLAR VOLUME CREDIT SOUGHT: \$ \_\_\_\_\_

INITIAL ORDER AMOUNT? \_\_\_\_\_

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NUMBER OF YEARS IN BUSINESS \_\_\_\_\_

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### BANKING DETAILS

BANK NAME \_\_\_\_\_ TELEPHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

BRANCH ADDRESS \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_ CONTACT NAME \_\_\_\_\_

### TRADE REFERENCES

VENDOR 1: \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

PAYMENT ADDRESS \_\_\_\_\_ CONTACT \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX # \_\_\_\_\_

VENDOR 2: \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

PAYMENT ADDRESS \_\_\_\_\_ CONTACT \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX # \_\_\_\_\_

VENDOR 3 \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

PAYMENT ADDRESS \_\_\_\_\_ CONTACT \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX # \_\_\_\_\_

### CONDITIONS

Terms of sale, including terms of payment and charges, for each purchase are agreed to be those specified on the face of each invoice. Any action to enforce or interpret the terms shall be instituted and maintained in Superior Court of the County of Sussex, State of New Jersey. The customer hereby consents to the jurisdiction and venue of such court and waives any objections to such jurisdiction and to pay all costs of collection of legal 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 credit worthiness of the above named company. **The creditor is authorized to obtain credit reports on the company should a credit availability be granted by the creditor, all decisions with respect to the extension of continuation shall be in the sole discretion of the creditor. In addition for Partnerships and Sole Proprietors only The creditor is authorized to obtain credit reports on the proprietors, partners or principles should a credit availability be granted by the creditor, all decisions with respect to the extension of continuation shall be in the sole discretion of the creditor.** The creditor, at its sole discretion, may terminate credit or change terms without notification to the customer.

**I have read and understand the above terms and conditions, and hereby agree to them.**

NAME \_\_\_\_\_  
(Please Print)

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANTS TITLE \_\_\_\_\_

PRINTED NAME OF WORLDWIDE SUPPLY SALESPERSON \_\_\_\_\_