



CREDIT APPLICATION

Today's Date

Company Name:			
Physical Street Address:			
City/State/Zip Code:			
Country:			
Telephone:		Fax:	
Email Address:			
Please check one:		<input type="radio"/> Individual <input type="radio"/> Partnership <input type="radio"/> Corporation	

Please provide a brief background of your company by checking the box that applies:

<input type="radio"/> Filter Company / Distributor	<input type="radio"/> HVAC Supplies / Wholesale	<input type="radio"/> Industrial Supplies / MRO
<input type="radio"/> End User	<input type="radio"/> OEM	<input type="radio"/> National Account
<input checked="" type="radio"/> Purchasing Group Affiliation		

How long in business under current ownership: _____

Tax Information

Filter Purchases for Resale?	
Sales Tax Exempt Number:	
Federal Tax I.D. Number/SS#:	

Please attach a copy of your tax exemption certificate.

Owners and Officers:

Name:		Title:	
Name:		Title:	
Name:		Title:	

Name of Purchasing Contact:

Name:		Fax#:	
Telephone:		Email:	

Name of Account Payable Contact:

Name:		Fax#:	
Telephone:		Email:	

Choose one of the following to receive your invoices and statement:

Email:	
Fax:	

Estimated monthly purchases _____

Bank Reference:

Name of Financial Institution:			
Contact Person:		Account #	
Address:			
City/State/Zip Code:			
Telephone:		Fax#:	

I hereby authorize the release of any information concerning our firm, including information regarding our financial credit history and account # _____ to the "Issued to" company listed above. I understand this company is relying on this information solely for the purpose of granting credit terms with our firm and it is necessary to verify our firm's reference. I ask that this request be handled in a timely manner. Thank you.

Trade References:

Name of Trade:			
Contact Person:			
City/State/Zip Code:			
Telephone:		Fax:	
Name of Trade:			
Contact Person:			
City/State/Zip Code:			
Telephone:		Fax:	
Name of Trade:			
Contact Person:			
City/State/Zip Code:			
Telephone:		Fax:	

Terms:

The contract for the supply of Goods or parts will be governed by the laws of the state of Kentucky, without reference to any conflict of laws principles that would require the application of the laws of any other jurisdiction. The United Nations Convention on Contracts for the International Sale of Goods shall not apply. Buyer irrevocably consents to the personal jurisdiction of the state and federal courts located in the State of Kentucky, for any suit or action arising from or related to the Goods, and waives any right Buyer may have to object to the venue of such courts. Buyer further agrees that these courts will have exclusive jurisdiction over any suit or action initiated by Buyer against Koch.

By signing this application for credit, you understand your credit terms are: "NET 30" (Due 30 days date of invoice)

And agree to proper payment in consideration of extended credit.

Print Name:	Title:
Signature:	Date:

Please return this form to: Koch Filter, 8401 Air Commerce Drive, Louisville, KY 40219

OR fax or email to: (502) 634-2364 or KochAR@kochfilter.com

Internal Use Only

Sales Rep Code		Short Name	
Customer Type		Terms Code	
Customer Region		Cust Channel	
Set up Date		Additional Information:	
Reactivation Date			
Customer #			
Credit Limit			
Approval Signature			