



MAILING ADDRESS
PO BOX 558, ELKHORN WI 53121

PHYSICAL ADDRESS
940 E GENEVA ST, ELKHORN WI 53121

EMAIL ap@stuarttank.com

CREDIT APPLICATION

LEGAL NAME: _____ **FEDERAL ID #:** _____

Doing Business As: _____ OR **SOCIAL SECURITY #:** _____

PHONE: _____ **EMAIL:** _____ **FAX:** _____

BILL TO ADDRESS: _____

SHIP TO ADDRESS: _____

LIST ADDITIONAL SHIP TO ADDRESSES ON A SEPARATE PAGE IF NECESSARY

COUNTY: _____ **YEAR BUSINESS STARTED:** _____

TYPE OF BUSINESS: CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP OTHER
STATE OF ORGANIZATION _____

WEBSITE: _____ **DUN & BRADSTREET NUMBER:** _____

OWNER/OFFICER: _____ **TITLE:** _____

PHONE: _____ **EMAIL:** _____

PURCHASING/SERVICE CONTACT: _____ **PHONE:** _____
EMAIL: _____

ACCOUNTS PAYABLE CONTACT: _____ **PHONE:** _____
EMAIL: _____

PO REQUIRED? _____ **BACK ORDER ALLOWED?** _____ **TAX EXEMPT?** _____
IF YES, PLEASE ATTACH EXEMPTION FORM

TRADE REFERENCES:

1) **BUSINESS NAME** _____ **ADDRESS** _____
CONTACT _____ **EMAIL** _____ **PHONE #** _____

2) **BUSINESS NAME** _____ **ADDRESS** _____
CONTACT _____ **EMAIL** _____ **PHONE #** _____

3) **BUSINESS NAME** _____ **ADDRESS** _____
CONTACT _____ **EMAIL** _____ **PHONE #** _____

FINANCIAL INSTITUTION

NAME: _____ **CONTACT:** _____

PHONE: _____ **ADDRESS:** _____

EMAIL: _____

LEGAL NAME _____

EQUIPMENT TYPE (Check all that apply):

- DRY BULK CHEMICAL PETROLEUM ASPHALT SANITARY CRUDE FERTILIZER
- FARM PICKUP TRUCK MOUNT, TYPE _____ STORAGE DUMP
- FLAT BED DROP DECK BELT HOPPER TIPPER WALKING FLOOR
- OTHER: _____ BLOWERS FABRICATION AND/OR PARTS ONLY

CONTACT @ STUART TANK SALES CORP _____

AGREEMENT

All information in this application and all attachments are correct to the best of my knowledge. I authorize Stuart Tank Sales Corp and/or its lenders, participants and assigns to verify employment and all financial and other information submitted with this application, including obtaining a consumer credit report, to act on this application. I authorize such parties making continued inquiries about such information and obtaining a consumer credit report during the term of obligations. As required by law, my identity will be verified. I authorize all past or present creditors to release any and all necessary credit information, and to respond fully to requests for information based on this application when transmitted by electronic or other means. The above permissions and authorizations will apply to any creditor to whom this application is submitted. I certify that the obligations applied to hereunder are for business, commercial or agricultural purposes and not for personal, family and household purpose. I certify that authorization has been obtained from those listed above, however have not signed below, to obtain their consumer credit report as they are applying to Stuart Tank Sales Corp for credit.

FAIR CREDIT REPORTING ACT: If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, contact Controller, 940 E Geneva Street, Elkhorn, WI 53121 or call 262.723.2200 within 60 days from the date of decision notification. A written statement of reasons for denial will be sent within 30 days of receiving request.

The Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. A number of federal agencies share enforcement responsibilities of this law. Determining which agency to contact depends on the type of creditor you dealt with. Consult the creditor to whom this application is addressed for information on its regulator, or contact The Federal Trade Commission, Consumer Response Center, Washington, D.C. 20580, 877.382.4357.

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____