



Application For Credit.

135 Commerce Drive, P.O. Box 128, Fort Washington, PA. 19034.
 Office Phone: 800 343-6888. Local Office Phone: 215 643-5182. Office Fax: 215 643-5349.
 Visit us at: www.bandiautosupply.com

Name of Business: _____

Address: _____ Years at Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Credit terms are net 10th.

The following information must be provided. It will be held in the strictest of confidence.

_____ Corporation _____ (Check here if incorporated within last 12 months.)
 _____ Partnership _____ Individual

Name of Principals:

Trade References:

Name: _____ Address _____
 Phone: _____ Contact: _____

Name: _____ Address: _____
 Phone: _____ Contact: _____

Name: _____ Address: _____
 Phone: _____ Contact: _____

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit. It is understood should we default on payment we will incur all court costs and attorneys fees not to exceed 20% of all invoice totals.

Signed: _____ Date: _____

Title: _____

***We're looking forward
to serving you!***

Parts Counter Phone: 800 345-4580. Parts Counter Fax: 800 232-6661