



14655 County Road 3610
St. James, MO 65559

800-264-3294 ~ 573-265-3294 ~ Fax 573-265-5667

Credit Application

Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Billing Address \_\_\_\_\_

Shipping Address (if different) \_\_\_\_\_

Accounts Payable Manager \_\_\_\_\_

Is this business a: Sole Proprietorship, Partnership or Corporation?

If Corporation: Year Inc. \_\_\_\_\_ State Inc. \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_

Corporate Officers \_\_\_\_\_

Principal Owner(s): \_\_\_\_\_

Is PO# Required ? \_\_\_\_\_ Yes \_\_\_\_\_ No

Bank Reference:

Name \_\_\_\_\_ Acct# \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Business References:

Name \_\_\_\_\_ Acct# \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Acct# \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Credit Terms:

- 1. Net due 30 days from billing date.
2. An account 60 days in age will be C.O.D. only, until the balance is paid in full. At that time a payment arrangement must be set up and followed through with as agreed upon or your credit line will be rejected. (It may also be rejected if this happens continuously.)
If credit is granted, I agree to pay by the terms outlined above and I understand that interest of 1.5% per month will be charged on past due balances. I also agree to pay all attorney's fees, court costs, collection costs and all other expenses which may be incurred in collecting past due balances or insufficient funds checks, as permitted by law. I authorize AAA to check references listed above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

Sales Tax Form

I, the undersigned purchaser, hereby certify that I am engaged in the business of selling, leasing or renting auto and body repairs or parts and that the tangible personal property described herein, which I shall purchase from above dealer will be resold, leased or rented by me; provided, however, that if any such property is used for any purpose other than retention, demonstration or display while holding it for sale, lease or rental in the regular course of business, it is understood that I am required to report and pay the tax measured by the purchase price of such property.

Description of property to be purchased for resale - Auto/Truck Parts.

Purchaser's Business Name \_\_\_\_\_

Signature of Authorized Purchaser \_\_\_\_\_

Address \_\_\_\_\_

Title \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date \_\_\_\_\_

Purchaser's Sales and Use Tax Number \_\_\_\_\_

For Internal Use only:

ENL: \_\_\_\_\_ REV: \_\_\_\_\_ NOTES: \_\_\_\_\_