COMSEARCH
An Andrew Company

CREDIT AGREEMENT

Must be completed in its entirety, FAX numbers required.

Business Name: _____

Mailing Address: _____

_____

_____

Shipping Address: _____

_____

_____

Telephone: _____ Facsimile: _____

Name of Parent Company: _____
(if subsidiary)

Year Established: _____ Tax ID: _____

Type of Ownership: ☐ Corporation ☐ Partnership ☐ Proprietorship

Financial Statement or Annual Report Available: ☐ Yes ☐ No

Name of Principals: _____ Title: _____

_____ Title: _____

_____ Title: _____

Bank Reference: _____ Acct No. _____

Address: _____ Telephone: _____

_____ Contact: _____

Trade References:

Company Name: _____ Contact: _____

Address: _____ Telephone: _____

_____ Fax: _____

Company Name: _____ Contact: _____

Address: _____ Telephone: _____

_____ Fax: _____

Company Name: _____ Contact: _____

Address: _____ Telephone: _____

_____ Fax: _____

Initial Order Value (approx.): $ _____ Date Required: _____

Are Purchase Orders Required ? _____

Are you tax exempt? If so, please provide tax or re-sale exemption certificate. _____

Yearly Purchases (est.) $ _____ Dun & Bradstreet No: _____

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____

I Agree to Pay Normal And Reasonable Fees and Costs Associated With Collection of Past Due Accounts.

Payment Terms are Net 30 days

RETURN TO: COMSEARCH
CREDIT CENTER
Facsimile: +1 (703) 726-5595