



Heidtman Steel Products

OVER 50 YEARS ON THE CUTTING EDGE

CREDIT APPLICATION FORM

Date _____

2401 Front Street
email:

Toledo, OH 43605
Patrice.Vincent@heidtman.com

Phone: 419-691-4646
Sharon.Zerman

Fax: 419-698-1317
Dave.Condon

Please Print/Type and Fill Out Completely, then **forward to Credit Dept.** at the above address.

• **Companies Legal Name** _____ • D & B No. _____
 • Address _____ • City _____ • State _____ • Zip _____
 • Main Phone No _____ • Main Fax No. _____

• Trade Name/DBA _____
 • Subsidiary or Division of _____

• **Billing Address** _____ • City _____ • State _____ • Zip _____
 (if different) _____

• Parents Company Name _____
 • Address _____ • City _____ • State _____ • Zip _____

• Type of business: _____ Corporation _____ Partnership _____ Sole Proprietorship _____ Public Company
 _____ LLC in which State _____

If Incorporated which State _____ Additional Branches/Subsidiaries _____ yes (describe below) no _____

Est. Annual Sales of your Company _____ Year Business Opened _____ PO's Required _____

Business Property Owned by Company or Leased _____

Corporate Federal Tax ID NO. _____

• **Steel Trade References** (you may reference or attach a separate sheet)

	<u>Name</u>	<u>City</u>	<u>State</u>	<u>Phone#</u>	<u>Fax#</u>
1)	_____	_____	_____	_____	_____
2)	_____	_____	_____	_____	_____
3)	_____	_____	_____	_____	_____
4)	_____	_____	_____	_____	_____

Bank/Lending Institution

• _____ • Fax No. _____

Are there any judgments or liens on any of your assets? _____ Who is the security in favor of? _____

Disclosure Authorization and Approvals:

I/We represent that the above information is true and is given to induce Heidtman Steel Products (HSP) to extend credit to the applicant. My company and I/We authorize all trade references, banks, and credit reporting agencies to disclose to HSP any information concerning financial and credit information of my company.

I/We understand that the terms are current to Quotation and Applicant's Signature attest to Solvency and willingness to pay in accordance with current terms quotation for all Steel Purchases, Processing Purchases, or Storage Services. In the event that any account is placed with a third part for collection, I/We agree to pay including attorney fees, court cost, and finance charges. I/We agree to notify HSP immediately of change in ownership or address changes.

• Heidtman Sales Person Signature

• Annual/Monthly HSP Sales Est. _____ / _____

• Signature of Authorized Applicant

• Printed Name of Applicant
 • Title: _____ • Date _____

Companies Legal Name: _____

● **Financial Information:** _____ will be held in Strict Confidence within our Credit Dept.

To allow the most expeditious processing of the application, please provide last two fiscal year end Balance Sheet and Income Statement. They can either be attached or mailed directly to the Credits Dept's Attention

Balance Sheet Attached? _____ Yes _____ No _____ Mailed to Credit Dept.

Income Statement Attached? _____ Yes _____ No _____ Mailed to Credit Dept.

Name of Contact for Financial/Credit Information: _____ Name: _____

● **Contact Information:**

Controller/CFO Contact: _____ Title: _____

Phone: _____ Fax: _____

Accounts Payable contact: _____ Fax: _____ Email: _____

Owners Name: _____ State of Residency: _____

Name of Legal Entity responsible for Payments is _____

Names authorized to sign for Company _____

● **ECOA Notice:**

The Federal Equal Credit Opportunity Act Prohibits creditors from discriminating against credit applicant on the basis of race, color, religion, national origin, sex, marital status, age. The Federal agency that administers compliance with this law concerning credit is the Federal Trade, Federal agency that administers compliance with this law concerning credit is the Federal, Division of Practices, 6th & Pennsylvania Ave. NW, Washington, DC 20580

Any other Information you would like us to consider when establishing Credit Terms for your company: _____

