

SOOSAN USA, INC. 1261 Wiley Rd Unit B Schaumburg, IL 60173 Tel (847) 744 5982 | Fax (847) 890 6728

## **BUSINESS CREDIT APPLICATION**

CONTACT INFORMATION					
YOUR NAME		TITLE			
EMAIL		PHONE	PHONE		
BUSINESS INFORMATION AS REGI	STERED				
COMPANY NAME					
ADDRESS		PHONE			
CITY	STATE		ZIP CODE		
LENGTH OF TIME AT CURRENT ADDRESS:		YEARS	MONTHS		
TYPE OF BUSINESS: SOLE PROPR	IETORSHIP   PA	ARTNERSHIP   L	LC   CORPORTATION   OTHER		
BANK INFORMATION					
BANK NAME		CONTACT NAME	CONTACT NAME		
PHONE		EMAIL			
ADDRESS		TITLE			
CITY	STATE		ZIP CODE		
TYPE OF ACCOUNT	ACCOUNT N	IUMBER			
☐ Savings ☐ Checking ☐ Other					
	·				
BUSINESS REFERENCES					
Please provide us a minimum of th	ree other compani	es your business ha	s established credit with previously		
1   COMPANY		CONTACT NAME			
PHONE		EMAIL			
ADDRESS		TITLE			
CITY	STATE	ZIP CODE			
COMMENTS					
2   COMPANY C		ONTACT NAME			
PHONE E		MAIL			
ADDRESS TI		TITLE			
CITY	STATE	ZI	P CODE		
COMMENTS					



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BUSINESS REFERENCES	
Continued from previous page	

3   COMPANY		CONTACT NAME	
PHONE		EMAIL	
ADDRESS		TITLE	
CITY	STATE		ZIP CODE
COMMENTS			

4   COMPANY		CONTACT NAME	
PHONE		EMAIL	
ADDRESS		TITLE	
CITY	STATE		ZIP CODE
COMMENTS			

## **CREDIT AGREEMENT**

- 1. We understand that we must notify Soosan USA, Inc., in writing of any change in ownership, the name of business or structure of the business under which credit is established.
- 2. We authorize you to verify the above information and / or obtain additional information by securing data from a credit reporting agency.
- 3. We are aware that Soosan USA's normal billing terms are net-30 day from the date of invoice and all past due balances will be subject to a 1.5% per month service charge.
- 4. Open orders may be held in the event of our existing credit limit is exceeded or in the event we fail to pay invoiced within terms.
- 5. Should we exceed our credit limit or this account becomes past due, we understand that Soosan USA, Inc has the right to refuse or cancel any orders until the account is satisfied in full.
- 6. We also understand that Soosan USA, Inc has the right to take any necessary steps to collect this account.
- 7. In the event of default and this account is turned over to an agency and / or attorney for collection, the undersigned agrees to pay all reasonable attorney fees, and / or costs of collection whether or not suit is filed.



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We certify that the information provided to Soosan USA is true and correct and we agree to pay this account in			
accordance with your credit terms.			
COMPANY REPRESENTATIVES			
1   SIGNATURE	TITLE		
NAME	DATE		
2   SIGNATURE	TITLE		
NAME	DATE		
NOTES & COMMENTS			