



# CREDIT APPLICATION

Please complete & return to:  
Action Labor of \_\_\_\_\_  
Fax: \_\_\_\_\_

Customer Name: \_\_\_\_\_ Federal ID#: \_\_\_\_\_ D & B #: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

### PLEASE ATTACH 3 TRADE REFERENCES WITH CONTACT INFORMATION

Type of Company:  Corporation (type \_\_\_\_\_)  Partnership (type \_\_\_\_\_)  Sole Proprietor  Other (type \_\_\_\_\_)  
Owner/President: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Bank Name: \_\_\_\_\_ Account Number(s): \_\_\_\_\_  
Accounts Payable Contact: \_\_\_\_\_ Phone Number (if different): \_\_\_\_\_  
Payments are made from (if different from above listed addresses): \_\_\_\_\_ Date Business was Established: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

Is this account going to be used for payroll purposes only? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is overtime authorized? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Agreed Bill Rate: Unskilled Labor _____	Semi-Skilled Labor _____	Skilled Labor _____
Transportation Rate _____	No. of men needed daily _____	

### \*\*\* PLEASE READ CAREFULLY \*\*\*

The person(s), corporation, or firm, whose name appears on this application, and to whom an open line of credit is extended, will be notified as to the amount of credit extended. All applications approved for credit are governed by the following:

- Credit will not be extended beyond the amount that will cause an account to exceed the established line of credit as determined by the Action Labor Corporate Credit Department.
- The client agrees to the payment terms of "Net 14 Days." Invoices unpaid over 14 days shall be considered past due and Action Labor reserves the right to assess an interest charge at the highest rate allowable by law.
- If an account reaches 15+ days past due, the account will be put on hold until the account is brought current.
- That the information provided is correct and was provided to induce Action Labor to extend open credit to the persons, firm, or corporation applying.
- A handling charge of \$30.00, plus 5% of the face amount of the check, will be assessed to checks returned for any reason. Action Labor reserves the right to require future payments to be made in the form of cash, money order, or cashier's check, from that date forth.
- If there is a disputed charge, the Credit Department must be notified within 10 days of the invoice date. All undisputed items must be paid in accordance with the terms and conditions set forth in this application.
- That in the event of non-payment, if the account is sent to a third party for collection, or legal proceedings are instituted, the person(s), firm, or corporation to whom open credit was extended agrees to bear the expense of all collection fees, legal expenses plus reasonable attorney's fees, as well as the principal, interest, and late charges assessed.
- That notice will be given to Action Labor of any change in the business structure, within (30) days of such change. Notice is to be given by certified or registered letter and acknowledged by return receipt.
- Credit policies are subject to change at the discretion of the Credit Department. Upon acceptance of this application, and the issuance of an open credit line, the applicant agrees to abide by the credit policies of Action Labor.
- The account will assure Action Labor that any employee of person(s), firm, or corporation applying for open credit, who is signing daily work tickets is authorized to do so, and is authorized to accept the terms and conditions of the work tickets.
- That minimum billing per ticket is for four (4) hours per person, per day.
- Action Labor reserves the right to cancel services to the account as a result of non-compliance of the terms stated above.
- That permission is granted as evidence by my (our) signature(s) below, for Action Labor to obtain credit information for the purpose of determining credit worthiness. That the creditor, bank, lending institution, or third party firm contacted has my (our) permission to furnish Action Labor with any and all information requested.

Authorized Signature of Owner or Officer: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name of Signer: \_\_\_\_\_ Title: \_\_\_\_\_

In the event that sufficient credit information is not available through my business credit, permission is hereby granted, as evidence by my signature, for Action Labor to obtain my personal credit information for the purposes of determining credit worthiness. Upon signing this application, I personally guarantee the payment of all invoices in full in accordance with the terms outlined above.	
Authorized Signature of Owner: _____	Date: _____
Printed Name of Signer: _____	Title: _____