



Therma-Stor[®] LLC

4201 Lien Rd., Madison, WI 53704 • TOLL-FREE 1-800-533-7533
FAX: 608-222-1447 • sales@thermastor.com • www.thermastor.com

Credit Application for Businesses

Company	
Contact	
Fax	Phone
Credit Application Sent by	
Date	P.O./Job Name
This box for Therma-Stor use only.	

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

Principal(s) _____

Tax Exempt ID# _____ State _____ (please attach copy of certificate)

Date Business Started _____

Credit limit Requested _____

Company operates as: Sole Proprietorship Partnership Corporation LLC

SS# _____ Fed ID# _____ D&B# _____

Type of Business _____

Own/Rent _____ Former Business Name _____

Bank Reference

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Contact Name _____

Account # _____

Trade References

Name _____

Address _____

Phone _____

Fax _____

Contact _____

Name _____

Address _____

Phone _____

Fax _____

Contact _____

Name _____

Address _____

Phone _____

Fax _____

Contact _____

Name _____

Address _____

Phone _____

Fax _____

Contact _____

The undersigned represents that he or she is authorized to act for Applicant and agrees on behalf of the Applicant as follows: Any indebtedness incurred by Applicant to Supplier will be primarily of business purposes. Any indebtedness incurred by Applicant to Supplier will be paid in full according to Supplier's terms of the Supplier's invoice reflecting such indebtedness, unless otherwise agreed in writing by Supplier. Any indebtedness not paid when due will be subject to a late payment penalty of 1% per month, until paid in full. Applicant hereby authorizes Supplier, and credit bureau, or other investigative agency employed by supplier, to investigate the references herein listed or statements or other data obtained from Applicant. Should credit be granted by Supplier, all decisions with respect to extension or continuation shall be in the sole discretion of Supplier. Supplier may terminate any credit availability within it's sole discretion. Information provided is not shared with any organization outside of the purpose of establishing credit with Supplier.

Signature _____ Date _____ Time _____