



Gajeske, Inc. - Polyethylene Pipe Specialist

Branch _____ Sales Rep _____

Please Email the Completed Credit Application to: ar@gajeske.com
or fax to Credit Department 713-980-5290

Credit Amount Requested: _____

General

Legal Business Name _____
Bill to _____
Ship To _____
Phone # _____ Fax # _____ Cell # _____

AP Contact Name _____
Phone # _____ Fax# _____ Cell # _____
AP Contact Email _____

Purchasing Contact _____ Phone # _____
Purchasing Contact Email _____ Fax # _____

Type of Business _____
Years Established _____ Fed Tax ID # _____

How would you like to Receive Invoices [] US Postal Service [] Email
Email address for submitting invoices _____

Will your Purchases be Tax Exempt Yes _____ No _____
----> If YES, Please return a properly COMPLETED Sales Tax Certificate with this application, Fax a Copy
of Company Letterhead or Business Card with the application

Ownership

Check One: [] Corporation [] Partnership [x] Individual [] Subsidiary
If Corporation _____ State Incorp _____ Year Incorp _____
If Subsidiary _____ Parent Company Name _____
Address _____ Phone _____

NAMES, HOME ADDRESSES & DRIVERS LICENSE OF OWNERS OF THE COMPANY: WE CANNOT PROCESS YOUR
REQUEST FOR CREDIT WITHOUT THIS INFO.

1. Name _____ Address _____
DL # _____
2. Name _____ Address _____
DL # _____

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Has the Firm/Company or any of it's Principals Ever Declared Bankrutcy?

If YES, Please Explain _____

Size of Your Company:

of Employees _____ Total Sales _____ # Branches _____

Bank Reference

Bank Name _____ Phone # _____
Address _____ Fax # _____
Account # _____ Contact _____
Type of Acct Checking Savings Loan Line of C redit

Trade References

(MINIMUM of 4 References Required) - Phone and Fax # Required

Name _____	Phone # _____
Address _____	Fax # _____
Account # _____	Contact _____
Name _____	Phone # _____
Address _____	Fax # _____
Account # _____	Contact _____
Name _____	Phone # _____
Address _____	Fax # _____
Account # _____	Contact _____
Name _____	Phone # _____
Address _____	Fax # _____
Account # _____	Contact _____

By signing this form, I/We authorize a Gajeske, Inc. representative to contact any/all of the above references and to obtain a credit report from a local Credit Reporting agency. Upon credit approval, I/We agree to abide fully within your payment terms and other billing policies.

Our credit terms are as follows: all products are Net 30 days, Machine Rentals & Labor/Technician Charges are Net 10. All unpaid invoices shall incur an interest rate of 1.5% per month. In the event of default in payment of any amount due, this account may be placed on C.O.D. If the account is placed for collection or legal action is pursued, I/We agree to pay an additional charge equal to the cost of collection, including agency and attorney fees and court cost incurred and permitted by laws governing these transactions, and interest at the maximum allowed by law beginning at the invoice date.

Signature of Authorized Company Representative

Date

Printed Name

Title

WE CANNOT PROCESS YOUR REQUEST FOR CREDIT WITHOUT AN AUTHORIZED SIGNATURE