

Acct #  
(Office Use Only)

# L. E. KLEIN CO., INC.

## CREDIT APPLICATION

Sales #  
(Office Use Only)

DATE \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

CITY, STATE, & ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

SHIP TO ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY, STATE, & ZIP \_\_\_\_\_

Type of Business:    Corporation      Partnership      Individual      Yrs. In Business \_\_\_\_\_

Tax Exemption Certificate Attached?    Yes      No      Lic# \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Do you want to be on email newsletter/sales list?    Yes      No

**ALL REFERENCES MUST HAVE COMPLETE NAME & CONTACT INFORMATION WITH FAX #'s / EMAIL**

(1) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Fax \_\_\_\_\_  
City, State & Zip \_\_\_\_\_ Email \_\_\_\_\_

(2) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Fax \_\_\_\_\_  
City, State & Zip \_\_\_\_\_ Email \_\_\_\_\_

(3) Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Fax \_\_\_\_\_  
City, State & Zip \_\_\_\_\_ Email \_\_\_\_\_

Bank Reference:    Name \_\_\_\_\_ Phone \_\_\_\_\_  
                          Address \_\_\_\_\_ Fax \_\_\_\_\_  
                          City, State & Zip \_\_\_\_\_ Email \_\_\_\_\_  
                          Account Number \_\_\_\_\_ Bank Officer \_\_\_\_\_

Initial Purchase \$ \_\_\_\_\_ Est. Monthly Purchase \$ \_\_\_\_\_ Est. Yearly Purchase \$ \_\_\_\_\_

The undersigned agrees to pay promptly when due all invoices representing purchases on credit to this application, including applicable service charges, if any. All accounts are payable at seller's office in Dallas County, TX and shall be made to L. E. Klein Co., Inc., Carrollton, TX 75006. Default in payment shall entitle L. E. Klein Co. to recover its collection costs, reasonable attorney's fees, interest and disbursements or, at its option, to recover the merchandise without liability of any kind. A security interest is retained by L. E. Klein in all materials sold pursuant hereto, and is hereby granted the undersigned, or any of them. L. E. Klein Co., Inc. is expressly granted all the rights and remedies available to a secured party contained in the Texas Business and Commerce Code. The undersigned hereby authorizes you to investigate its credit record and report to proper persons and bureaus its performance of this agreement. Each guarantor unconditionally agrees to be jointly, severally and primarily liable for the payment of the aforesaid invoices and costs. In order to determine credit worthiness, I authorize all trade and bank references listed above to release credit history to L.E. Klein Co., Inc.

\_\_\_\_\_  
Printed name of Owner or Corporate Officer

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Signature

**P.O. BOX 112850 \* CARROLLTON, TX 75011-2850**

**1020 HAYDEN DR \* CARROLLTON, TX 75006**

**1-800-251-0073      972-820-8811**

**FAX 972-820-8899      1-866-LEKLEIN**

**lek.co@leklein.com**

**www.leklein.com**