



APL Fabricators, Inc & Stone LLC
P.O. Box 368 o 654 Commerce Drive
Hastings, MN 55033
ph: 651-438-2223 o fax: 651-438-1199

APL CREDIT APPLICATION CONT.

PERSONS AUTHORIZED TO ORDER MATERIAL FROM APL

NAME & TITLE _____
EMAIL ADDRESS _____
NAME & TITLE _____
EMAIL ADDRESS _____
NAME & TITLE _____
EMAIL ADDRESS _____

ACCOUNTS PAYABLE INFORMATION

NAME & TITLE _____
TELEPHONE (_____) _____ FAX(_____) _____
EMAIL ADDRESS _____
INVOICES SENT TO-PLEASE CIRCLE ONE COMPANY PARENT
STATEMENTS SENT TO-PLEASE CIRCLE ONE COMPANY PARENT

BANK REFERENCE

BANK NAME _____ ACCOUNT # _____
ADDRESS _____
CITY, STATE & ZIP _____
TELEPHONE (_____) _____ FAX(_____) _____

TRADE REFERENCES_(MUST LIST THREE REFERENCES)

COMPANY NAME _____ ACCOUNT # _____
ADDRESS _____
CITY, STATE & ZIP _____
TELEPHONE (_____) _____ FAX (_____) _____

COMPANY NAME _____ ACCOUNT # _____
ADDRESS _____
CITY, STATE & ZIP _____
TELEPHONE (_____) _____ FAX(_____) _____

COMPANY NAME _____ ACCOUNT# _____
ADDRESS _____
CITY, STATE & ZIP _____
TELEPHONE (_____) _____ FAX(_____) _____



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APL CREDIT APPLICATION CONT.

****THE UNDERSIGNED WARRANTS THAT HE/SHE IS AUTHORIZED TO EXECUTE THIS CREDIT APPLICATION ON BEHALF OF THE APPLICANT; WARRANTS THAT THE INFORMATION CONTAINED IN THIS CREDIT APPLICATION IS TRUE, CORRECT AND COMPLETE; AND GRANTS PERMISSION FOR APL TO INVESTIGATE THE REFERENCES PROVIDED, INCLUDING BOTH COMMERCIAL AND CONSUMER CREDIT CHECKS. THE APPLICANT AGREES TO PAY APL OR ITS ASSIGNS WITHIN THE TERMS OF THE SALE AND CONSENTS TO A \$30.00 SERVICE CHARGE FOR ANY DISHONORED CHECK. THE APPLICANT FURTHER AGREES THAT A SERVICE CHARGE OF THE LESSER OF 1.5% PER MONTH OR THE HIGHEST RATE ALLOWABLE UNDER APPLICABLE LAW MAY BE ASSESSED AGAINST ANY ACCOUNT NOT PAID WITHIN 30 DAYS OF INVOICE DATE. IN THE EVENT A PAST DUE ACCOUNT IS REFERRED FOR COLLECTION, THE APPLICANT CONSENTS TO THE JURISDICTION OF THE COURTS OF THE STATE OF MINNESOTA AND AGREES THAT THE APPLICANT SHALL PAY ALL COSTS OF COLLECTION, INCLUDING BUT NOT LIMITED TO REASONABLE ATTORNEY FEES.**

NAME AND TITLE (PLEASE PRINT) _____

SIGNATURE AND DATE _____

****PERSONAL GUARANTEE-MUST BE SIGNED FOR CUSTOMER TO OBTAIN ACCOUNT****

AS CONSIDERATION FOR THE EXTENSION OF CREDIT TO THE APPLICANT NAMED IN THIS CREDIT APPLICATION THE UNDERSIGNED PERSONALLY GUARANTEES AND AGREES TO PAY UPON DEMAND THE FULL AMOUNT OF ANY INDEBTEDNESS OWED BY THE APPLICANT TO APL , INCLUDING BUT NOT LIMITED TO COSTS OF COLLECTION AND REASONABLE ATTORNEY FEES. THE UNDERSIGNED, INDIVIDUALLY, CONSENTS TO THE JURISDICTION OF THE COURTS OF THE STATE OF MINNESOTA.

NAME AND TITLE (PLEASE PRINT) _____

SIGNATURE AND DATE _____

NAME AND TITLE (PLEASE PRINT) _____

SIGNATURE AND DATE _____

NAME AND TITLE (PLEASE PRINT) _____

SIGNATURE AND DATE _____