



STEEL MART, INC.

P.O. Box 48428

Atlanta, Georgia 30362

www.steelmartatlanta.com

CREDIT APPLICATION

Date of Request: _____

Credit Limit Amount Request: \$ _____
(This should be your approximate monthly purchase amount.)

Company Name: _____

Phone #: _____ Fax #: _____ Contact: _____

Physical Address: _____
(Street) (City) (State) (Zip)

How long at current address? _____

Billing Address: _____
(Street) (City) (State) (Zip)

Accounts Payable Contact: _____ Phone # (If different from above): _____

Federal ID #: _____ Dun & Bradstreet #: _____ Georgia Tax #: _____
(Attach exempt form)

Check all that apply: MTR's Required PO's Required Paperless Billing _____
(E-mail Address or Fax #)

Business Type: Individual Partnership Corporation

Business Start Date: _____ Incorporation Date: _____ State Incorporated: _____

Name of Banking Institution: _____

Address: _____
(Street) (City) (State) (Zip)

Phone #: _____ Fax #: _____ Contact: _____

Trade References:

1) Name: _____ 2) Name: _____ 3) Name: _____

Contact: _____ Contact: _____ Contact: _____

Phone: _____ Phone: _____ Phone: _____

Fax: _____ Fax: _____ Fax: _____

I or we, the undersigned agree to comply with all invoice terms. I or we hereby personally guarantee payment of any indebtedness from the applicant. Each of us further agrees that in the event of default on the accounts, we are to pay reasonable collection costs, including attorney's fees and court costs.

Owner/Officer(s):

President Name: _____

Vice President Name: _____

Phone #: _____

Phone #: _____

Signature: _____

Signature: _____

This information is for the purpose of obtaining credit and is warranted to be true. I agree to pay all bills when due. I hereby authorize the person or firm to whom this application is made, any credit bureau or other investigative agency employed by such person, to investigate the references herein listed or statements or other data obtains from me or from any person pertaining to my credit and financial responsibility.

Signature of Applicant: _____

Date: _____

Printed Name of Applicant: _____

Title: _____