



## GRANDVIEW ALUMINUM PRODUCTS

P.O. BOX 687 110 W. 4TH ST.  
GRANDVIEW, IN 47615  
(812) 649-2569

WATS Order Line: 1-800-457-3540

Fax No.: 1-812-649-2526

homepage <http://www.gapalum.com> Email: [gapalum@psci.net](mailto:gapalum@psci.net)

### CREDIT APPLICATION

EIN#:

NAME OF BUSINESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

PHONE NUMBER: ( ) \_\_\_\_\_

TAX EXEMPT NO.: \_\_\_\_\_

OWNER OF PRINCIPAL OFFICER NAME: \_\_\_\_\_

### BANK REFERENCE:

BANK: \_\_\_\_\_

ACCT. NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE NO.: ( ) \_\_\_\_\_

### TRADE REFERENCES:

1) NAME: \_\_\_\_\_

ACCT. NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NO. ( ) \_\_\_\_\_

2) NAME: \_\_\_\_\_

ACCT. NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NO. ( ) \_\_\_\_\_

3) NAME: \_\_\_\_\_

ACCT. NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NO. ( ) \_\_\_\_\_

### TO ALL BUYERS:

FOR YOUR CONVENIENCE IN BUYING ON AN OPEN ACCOUNT MONTHLY BASIS  
WE WILL NEED REFERENCES FROM YOUR BANK AND THREE FIRMS WHICH  
YOU DO BUSINESS WITH. THANK YOU FOR YOUR COOPERATION.

### TO OUR NEW CUSTOMERS:

A WORD ABOUT OUR CREDIT TERMS, YOUR INITIAL ORDER IS SHIPPED TO YOU  
ON A C.O.D. BASIS. UPON RECEIPT OF SATISFACTORY CREDIT REFERENCES,  
FUTURE ORDERS WILL BE SHIPPED ON OPEN ACCOUNT.

SIGNED: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_