



The Genius of Simple™

Application for Credit

For TCS Use Only	
Customer #:	_____
Sales Rep #:	_____ Sales Rep 2#: _____
Prospect Record:	_____
Approved:	_____

TCSRep: _____ PhoneNo. _____

Name of Company: _____

Billing Address: _____ City _____ State _____ Zip Code _____

Physical Address: _____ City _____ State _____ Zip Code _____

Phone: _____ Fax: _____ Email: _____

Ownership: Corporation Partnership Individual

Name(s) of Principal/Manager Partner/Owner: _____

Name of Accounts Payable Contact: _____ Email for A/P Contact: _____

Line of Business: _____ Number of Years in Business: _____

Dun & Bradstreet #: _____

Bank Reference (REQUIRED):

Bank: _____ Address: _____

Phone: _____ Fax: _____ Account Number: _____

Credit References Check - No Charge

Name of Company: _____

Contact: _____

Account Number: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Name of Company: _____

Contact: _____

Account Number: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Name of Company: _____

Contact: _____

Account Number: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Name of Company: _____

Contact: _____

Account Number: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Dun & Bradstreet Report - \$61.99

To expedite your credit application, TCS offers credit account authorization using a Dun & Bradstreet Business Credit Report. TCS charges a one-time, non-refundable \$61.99 fee that can either be paid by credit card or may be submitted as a line-item on your purchase order.

\$61.99 Credit Application Fee will be included on first order (PO must be attached).

Charge the \$61.99 Credit Application Fee to the credit card below (Visa or Mastercard only):

_____ - _____ - _____ - _____

_____/_____
Cardholder Name Expiration Date

Address

Security Code Signature of Cardholder

Note: FAX NUMBERS are REQUIRED for all credit references

For faster processing, please complete this Adobe® Acrobat Form electronically and return via email

This application serves as authorization for the above listed bank and references to release information to TCS. We certify that all the information on this form is correct. We fully understand the TCS credit terms (Net 30 Days) and agree to the proper payment in consideration for extended credit.

Signature: _____ Title: _____ Date: _____