

Gilden Tree Credit Agreement

I authorize my bank to release any information required for credit reference purposes. I also authorize a credit report to be obtained if needed. If my credit is approved, I agree that orders will be shipped Net 30 days, and I agree to inform Gilden Tree if I am ever unable to meet these terms. I agree to be personally responsible for payment. In the event that my account is sent for collection, I agree to pay the cost of collection, as well as the cost of the outstanding invoice. I also agree that if court action is necessary to collect, these proceedings will take place in Omaha, Nebraska.

COMPANY INFORMATION	Buyer's Name _____	Phone _____
	Company Name _____	Fax _____
	Address _____	Federal Tax ID # _____
	City _____ State _____ Zip _____	Retail Tax ID # _____
	Business is a: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> S-Corp <input type="checkbox"/> Corporation in the State of _____	How many years in business under this name? _____ yrs. Amount of credit requested \$ _____
	Authorized Signature _____ Please print name _____	Title _____ Date _____ <i>Signature must be that of Owner, Partner or Corporate Officer.</i>

ACCOUNTS PAYABLE INFORMATION	(only if different from above)	
	Contact _____	City _____ State _____ Zip _____
	Address _____	Phone _____ Fax _____

BANK REFERENCE <small>(This section must be completely filled in)</small>	Bank Name _____	Phone _____ Fax _____
	Address _____	Account Number _____
	City _____ State _____ Zip _____	Contact _____

TRADE REFERENCES <small>(Please list four businesses from whom you buy on credit)</small>	Company _____	Company _____
	Address _____	Address _____
	City _____ State _____ Zip _____	City _____ State _____ Zip _____
	Phone _____ Fax _____	Phone _____ Fax _____
	Account Number _____	Account Number _____
	Company _____	Company _____
	Address _____	Address _____
	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____ Fax _____	Phone _____ Fax _____	
Account Number _____	Account Number _____	

■ PAYMENT TERMS

Orders may be billed to your Visa, Mastercard, American Express or Discover card or Prepaid. Net 30 Accounts will be set up after completion of our Credit Agreement and approval. Please allow at least two weeks for processing.

■ RETURNS

Please inspect all goods within 10 days of receipt. For returns, please obtain an RA number from us. There is a 15% restock fee on undamaged goods.



Phone: 888-GILDENTREE (888-445-3368) Fax: 402-339-8826
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