



Customer Service: (405) 354.3644
Fax Orders: (405) 354.3645
Email Orders: orders@colorriteinc.com
Credit Department: accounting@colorriteinc.com
600 S. Ranchwood Boulevard
Yukon, Oklahoma 73099

Dear Credit Applicant:

Please complete all information on the application form (ie: fax number, email address, contact person). Attach copy of corporate officers, bank references, more trade references and/or exemption certificate. If there are more than one locations *or* your company is affiliated with a parent or other company's, *please* list individually and/or separately. Your account will be recognized by the locations telephone number *or* the location name returned on the credit application.

Unfortunately, if an application is returned unsigned or incomplete it will delay the process of setting up your account. **Please return to the above fax number or Credit Department email address.**

We would like to take this opportunity to briefly set forth our policy to maintaining an open account of Net. 30 These requirements are as follows:

1. **Invoices are payable within thirty (30) days from ship date.**
2. **Account must be used at least four (4) times yearly.**
3. **If consistently past due more than four (4) times per quarter the terms of the account will be credit card or cash only. To re-establish a Net. 30 open account a new credit application will have to be resubmitted.**
4. **There is a \$50.00 charge added to the payment of a returned check with insufficient funds.**
5. **Orders expedited by UPS (United Parcel Service) shipped NEXT DAY, 2nd DAY or 3rd DAY AIR requires an authorized signature before it will ship. Signature must be on your company order form or on a copy of the invoiced order. Signing this agreement indicates your acceptance of the terms and conditions for the item's ordered, shipping and handling charges and any applicable state taxes (Oklahoma).**

We thank you for your cooperation and interest in our company. We look forward to a productive business future together.

Sincerely,
COLOR RITE, INC.
Credit Department



INCORPORATED
 600 S. Ranchwood Boulevard
 Yukon, Oklahoma 73099
 Tel. 405.354.3644 Fax 405.354.3645
 Email Order Address:
 orders@colorriteinc.com

Credit Application

Please complete ALL information below, delays are possible if returned incomplete.
 Attach copy of corporate officers, bank references, trade references, exemption certificate and
 Sale & Use tax documents. If more than one location, or affiliated with another company please
 list individually with appropriate information. - Return by Fax or Email to: Attn: Credit Department

FAX 405.354.3645 or Email: ACCOUNTING@COLORRITEINC.COM

COMPANY NAME: _____ **Contact:** _____
 Address, City, State, Zip: _____
Telephone: (____) _____ **FAX:** (____) _____ **Email:** _____
 Type of business: _____ Year business opened: _____
 Federal ID#: _____ Dun & Bradstreet #: _____
What kind of installations are you involved with that require caulking products? This information will help us to determine which of our products best suit your needs. _____

BILL TO: Company name: _____ A/P contact name: _____
 Address, City, State, Zip: _____
Telephone: (____) _____ **FAX:** (____) _____ **Email:** _____
SHIP TO: Company name: _____ Purchasing contact name: _____
 Address, City, State, Zip: _____
Telephone: (____) _____ **FAX:** (____) _____ **Email:** _____

BANK REFERENCE

Name: _____ Date acct. opened: _____
 Contact person: _____ Title: _____
 Address, City, State, Zip: _____
 Telephone: (____) _____ FAX: (____) _____ Email: _____

CREDIT REFERENCES

1.) Company name: _____ **Contact person:** _____
 Address, City, State, Zip: _____
Telephone: (____) _____ **FAX:** (____) _____ **Email:** _____
2.) Company name: _____ **Contact person:** _____
 Address, City, State, Zip: _____
Telephone: (____) _____ **FAX:** (____) _____ **Email:** _____
3.) Company name: _____ **Contact person:** _____
 Address, City, State, Zip: _____
Telephone: (____) _____ **FAX:** (____) _____ **Email:** _____

➔ *The undersigned company hereby agrees that should a Net. 30 - credit account be opened, and in the event of default in the payment of any amount due, or if such account is submitted to a collection authority, the undersigned company agrees to pay an additional charge equal to the cost of collection by applying for credit with said company.*

Company name: _____
 Printed name: _____ Date: _____
 Signature: _____ Title: _____