



**Metal Works**  
 A Division of SMB Industries, Inc.  
 License #655446

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 Oroville, CA 95965  
 Phone 530-534-6266  
 Fax 530-534-5933  
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**METAL WORKS**

*INFORMATION AND CREDIT APPLICATION*

LEGAL NAME \_\_\_\_\_ DBA \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

P.O. BOX \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_  
 PHONE(\_\_\_\_\_) \_\_\_\_\_ FAX(\_\_\_\_\_) \_\_\_\_\_

THIS IS A  CORPORATION  PARTNERSHIP  SOLE PROPRIETORSHIP  
 IF CORPORATION GIVE NAMES, TITLES, AND SSI #'S OF ALL OWNERS/OFFICERS (ATTACH ADDITIONAL SHEET IF NEEDED).

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ SSI # \_\_\_\_\_  
 NAME \_\_\_\_\_ TITLE \_\_\_\_\_ SSI # \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ YEARS IN BUSINESS \_\_\_\_\_ # OF EMPLOYEES \_\_\_\_\_

FEDERAL TAX ID NO. \_\_\_\_\_ CONTRACTORS LICENSE \_\_\_\_\_ STATE \_\_\_\_\_

SALES TAX STATUS  TAXABLE  EXEMPT (IF EXEMPT ATTACH RESALE CERTIFICATE)  
 TAX EXEMPT # \_\_\_\_\_

ACCOUNTS PAYABLE CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_ EXT # \_\_\_\_\_

DO YOU USE PURCHASE ORDERS \_\_ YES \_\_ NO

*AUTHORIZED BUYERS:*

BANK NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
 ACCOUNT # \_\_\_\_\_ CONTACT \_\_\_\_\_

*LIST 4 SUPPLIERS WHICH YOU DO BUSINESS WITH OFTEN:*

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 CONTACT \_\_\_\_\_  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 CONTACT \_\_\_\_\_  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 CONTACT \_\_\_\_\_  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 CONTACT \_\_\_\_\_  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_

Applicant has carefully reviewed the representations set forth above and certifies all such representations to be complete and correct. Applicant agrees to pay its account within terms stated upon each invoice from Metal Works. Applicant further agrees to pay a service charge of 1 1/2 percent per month (18 percent per annum) or the highest rate allowed by Law, whichever is lower on all amount not paid within stated terms of sale. Applicant agrees to pay all costs of collection incurred by Metal Works, including attorney fees, whether or not any legal proceeding is initiated. In any action to collect indebtedness of Applicant to Metal Works, the prevailing party shall be entitled to recover its costs, disbursements, and attorney fees in connection with such action and any appeal or review. Applicant hereby warrants that all purchases made from Metal Works for which credit is extended will be used solely for commercial purposes and the furtherance of its business.

The undersigned grants permission to Metal Works the right to inquire of the above named references for credit information.

PRINTED NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_