

# Application for Commercial Credit Account

## Gauntlet Awards, Inc.

In order to use Gauntlet Awards Commercial Credit Account Billing System, you must have an established credit account with us. The first step is to complete this form and fax or mail it to us, or it can be completed and sent in with initial purchase which requires a full payment with placement of your first order.

You can also download a pdf of this form from our website: <http://www.gauntletawards.com/creditapp.pdf>. We will notify you once your account is set up.

For more information regarding this credit application or account set up, please call 937-264-4900 and ask for Christen Garrett, Accounting Director. Make sure everything is filled in and signed. Fax application to: 937-264-4903, attention Christen Garrett, Accounting Director, website submission or mail to address given below attention Christen Garrett. Be sure to keep a copy for your records.

### APPLICANT INFORMATION:

Full Legal Name of Organization: \_\_\_\_\_

Name of person authorized to order: \_\_\_\_\_

Person authorized to order E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing E-Mail: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_ Business Fax: (\_\_\_\_\_) \_\_\_\_\_

Company's Website: \_\_\_\_\_

### BUSINESS REQUIREMENTS:

Type of Organization:

Proprietorship  Corporation  Partnership  General  LLC  Trust

Government Entity  Other: \_\_\_\_\_

Federal Tax ID#: \_\_\_\_\_

Length of time in Business: \_\_\_\_\_

State of Incorporation: \_\_\_\_\_

Dunn & Bradstreet #: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Amount of Credit Requested: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**BILLING REQUIREMENTS:**

P.O. Required:  Yes  NO

Sales Tax Exemption:  Yes  NO

(Sales Tax Exemption Certificate must accompany application)

**Authorized Purchasers:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-Mail: \_\_\_\_\_

All persons listed above as authorized purchasers will be considered authorized purchasers until written notice is received by Gauntlet Awards, Inc. Accounts Receivable dept. Applicant is responsible for all purchases made by authorized purchasers. In order to be added to the applicant's credit application, the names of additional authorized purchasers must be submitted in writing to Gauntlet Awards, Inc., Corporate Office, Attention: Accounts Receivable Department, 8555 N. Dixie Drive, Dayton, Ohio 45414

**CREDIT INFORMATION:**

**Bank & Commercial Trade References (please provide at least 3 references)**

Name of your Bank: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bank Phone: (\_\_\_\_) \_\_\_\_\_ Bank Fax: (\_\_\_\_) \_\_\_\_\_

Bank Contact Person: \_\_\_\_\_

Bank Business Account number: \_\_\_\_\_

**BUSINESS CREDIT REFERENCES:**

1. Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Company Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Company Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Account Number: \_\_\_\_\_

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2. Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Company Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Company Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Account Number: \_\_\_\_\_

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3. Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Company Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Company Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Account Number: \_\_\_\_\_

**Gauntlet Awards, Inc. TERMS:**

In consideration of Gauntlet Awards, Inc. and/or subsidiaries selling to This Company or my agent(s), I (we) agree to the following terms:

1. To pay invoices in full within 15 days of the original invoice date.
2. In consideration of the granting of credit by Gauntlet Awards, Inc., to the person, firm, or company to whom credit was or is to be extended by the above application, the undersigned, jointly and severally, unconditionally guarantee payment for any and all purchases made previously, or to be made in the future, including a late fee of one and one half percent (1-1/2%) per month computed from month to month on all amounts 15 days or more past due.
3. In the event of non-payment, I (we) agree to pay all costs and expenses of collection, including attorney fees & continuing finance charges until payment is secured.
4. I (we) authorize the trade reference(s) & Bank stated above to disclose any credit reference information requested, as well as a credit bureau check to secure a line of credit.
5. I (we) understand Gauntlet Awards, Inc. reserves the right to close such account if terms are not complied with or if the credit limit is exceeded at any time.
6. I (we) understand that initial purchase requires a full payment with placement of your order unless approved ahead of time.

Signature below is that of the Authorized Company Official opening this account.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Please print out this form. Make sure everything is filled in and signed & keep a copy for your records.

Submit from our website, Mail or Fax it to:

Gauntlet Awards, Inc.  
Corporate Office  
Attention: Christen Garrett, Accounting Director  
8555 N. Dixie Drive  
Dayton, Ohio 45414  
937-264-4900  
937-264-4903 fax  
[cgarrett@gauntletawards.com](mailto:cgarrett@gauntletawards.com)  
[www.gauntletawards.com](http://www.gauntletawards.com)