



Superior Products
Outstanding Service
Innovative Solutions

EQUIPMENT	FINANCED BY	ADDRESS	AMT. OWING	PAYMENT
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____

Is Purchase Order required? YES NO Is there a special PO format? _____
 If no P.O. required, who is authorized to Purchase? _____

Attach copy of sales tax certificate or exemption.

MONTHLY CREDIT LIMIT REQUESTED \$ _____

CREDIT TERMS

Gateway Industrial Power, Inc. transactions are invoiced with terms of **Net 30 Days**, with approved credit limit. Invoices paid past Net 30 Days will be charged a Service Charge of 1.5% per month (18% per annum.) Service charges added to the account become a part of the principle obligation to Gateway Industrial Power, Inc.

Accounts are temporarily placed on a C.O.D. basis when becoming Thirty (30) days past due. If an account becomes Sixty (60) days past due, the account is placed permanently on a C.O.D. basis. The account must be paid in full each month.

PAYMENTS MAY NOT BE WITHHELD FOR ANTICIPATED CORE RETURNS OR PENDING WARRANTY. The dealer will post these credits to your account immediately upon receipt of cores or warranty credits from factory.

THE PURCHASER AGREES TO PAY ALL ATTORNEY'S FEES AND/OR COURT COSTS AS MAY BE DEEMED REASONABLE IN THE EVENT LEGAL ACTION BECOMES NECESSARY TO COLLECT ANY OUTSTANDING BALANCE. All payments due and payable at the following Gateway Industrial Power, Inc. address.

**REMIT PAYMENTS TO:
GATEWAY INDUSTRIAL POWER, INC.
P.O. BOX 843715
KANSAS CITY, MO 64184-3715**

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH ABOVE TERMS. **The below signature must be handwritten, typed will not be accepted.**

This is your credit contract.

THE ABOVE INFORMATION IS FOR THE PUPOSE OF OBTAINING CREDIT AND IS WARRANTED TO BE TRUE. I/WE HEREBY AUTHORIZE THE FIRM TO WHOM THIS APPLICATION IS MADE TO INVESTIGATE THE REFERENCES LISTED PERTAINING TO MY/OUR CREDIT AND FINANCIAL RESPONSIBILITY.

FIRM NAME _____

BY _____
(Must be handwritten signature by an Officer or Principal of the firm) Title

Date _____

RETURN TO: Credit Manager, Gateway Industrial Power, Inc., 921 Fournie Lane, Collinsville, IL 62234

csanders@gtr.inc | Fax: 618-343-7116

FOR OFFICE USE ONLY: Approved Declined

1. Account Number Assigned _____ 4. Taxable _____

2. Credit Limit _____ 5. D & B Code _____

3. P.O. Required _____ 6. Branch _____ State _____ County _____

Reviewed By _____ Date _____ Entered By _____

- | | | | | | | | |
|---|--------------------------------------|------------------------------------|-------------------------------------|---|-----------------------------------|--------------------------------------|-------------------------------------|
| Collinsville, IL
618.345.0123 | Cicero, IL
708-780-8975 | Justice, IL
708.563.7090 | McLean, IL
309.874.2243 | Mount Vernon, IL
618.242.4138 | Quincy, IL
217.224.6002 | Bridgeton, MO
314.291.5533 | Matthews, MO
573.481.9000 |
| Wright City, MO
636.745.2131 | Nashville, TN
615.366.1923 | De Pere, WI
920.339.9399 | DeForest, WI
608.846.0470 | Franksville, WI
414.304.0011 | Plover, WI
715.344.4464 | Sparta, WI
608.269.7797 | |