



Superior Products
Outstanding Service
Innovative Solutions

CREDIT APPLICATION

- ☐ Collinsville, IL ☐ Justice, IL ☐ McLean, IL ☐ Mt Vernon, IL ☐ Quincy, IL ☐ Cicero, IL
☐ Bridgeton, MO ☐ Matthews, MO ☐ Wright City, MO ☐ Nashville, TN
☐ De Pere, WI ☐ Franksville, WI ☐ DeForest, WI ☐ Plover, WI ☐ Sparta, WI

FIRM NAME		PHONE #		FAX #	
STREET				P.O. BOX	
CITY	COUNTY	STATE	ZIP		
FINAL INVOICE CONTACT NAME		FINAL INVOICE CONTACT PHONE		FINAL INVOICE CONTACT EMAIL	
ACCOUNTS PAYABLE CONTACT NAME		ACCOUNTS PAYABLE PHONE		ACCOUNTS PAYABLE EMAIL	
FULL NAME OF OWNER OR OWNERS (OR AN AUTHORIZED OFFICER OF CORPORATION) – LIST HOME ADDRESS & ZIP CODE					
NAME		ADDRESS		TITLE	
PLEASE CIRCLE	INDIVIDUAL	LLC	PARTNERSHIP	CORPORATION	Federal ID No:
					(For Corporation)
IF INCORPORATED, STATE IN WHICH INCORPORATED					SOCIAL SECURITY NO. (for individual)
TYPE OF BUSINESS					DATE STARTED
NAME OF BANK					ACCT. NUMBER
STREET ADDRESS			TELEPHONE NO.		FAX NO.
CITY					STATE
LIST 4 CREDIT REFERENCES AND COMPLETE ADDRESSES (utilities, vehicle loans and credit cards not applicable)					
NAME		ADDRESS		PHONE NO.	FAX NO./EMAIL

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	



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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

credit@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 _____

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