



International, Inc. APPLICATION FOR CREDIT

COMPANY NAME DUN AND BRADSTREET (D&B) NUMBER
STREET ADDRESS YEARS AT THIS ADDRESS
CITY STATE ZIP/POSTAL ZONE COUNTRY TELEPHONE NUMBER FAX NUMBER

The following information must be provided. It will be held in the strictest confidence.

OWNERSHIP

Corporation - State & Date Incorporated Partnership LLC Individual

Names and Locations of Parent Company, Subsidiaries, and Affiliates Connection

Names of Officers or Principals Position

ADDITIONAL KEY CONTACTS

Personal responsible for A/P in location where payments are made from: Buyer/ Purchasing Senior Management Liason
Name: Title: Phone: Fax: Email:

FINANCE

BANK NAME AND ADDRESS
BANK OFFICER BANK TELEPHONE NUMBER

DOCUMENTS TO INCLUDE:

- Trade references
If ship to location is in IL or FL, and you are purchasing goods for resale, please submit your current state issued resale/ tax exempt certificate.

AGREEMENT

We certify that all of the information on this form is correct. With the signature below we authorize Saf-T-Gard International, Inc. to conduct a credit check for the purpose of determining credit worthiness in order to conduct business between our two companies.

SIGNED DATE TYPED/ PRINTED NAME TITLE

For internal use only
TERMS:

Please return this by fax to 847-291-1610 or scan and e-mail to credit@saf-tgard.com

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