



STRUCTURAL STEEL
SALEM STEEL - HICKORY STEEL

Structural Steel of Carolina, LLC
 1720 Vargrave Street
 Winston-Salem, NC 27107

CREDIT APPLICATION FORM

Please complete, sign and return this form by e-mail to hsellers@steelofcarolina.com or fax to (336) 725-0523.

Company Information	
Legal Company Name	
Address:	
Address:	
Phone:	Fax:
Date Established:	Estimated Annual Sales:
Federal Tax ID Number:	Exempt from Sales and Use Tax: <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please attach copy of exemption certificate)
Type of Business: <input type="checkbox"/> Manufacturing <input type="checkbox"/> Wholesale <input type="checkbox"/> Service <input type="checkbox"/> Other	
Type of Company: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC	

Account Application Type
Terms: <input type="checkbox"/> Net 30 <input type="checkbox"/> Prepay <input type="checkbox"/> Credit Card

Names of Officers, Partners or Owners:	
Name:	Title:
Name:	Title:
Name:	Title:
Name:	Title:
Person to Contact Regarding Financial Matters:	

Bank References	
Bank Name:	
Address	
Contact Name	
Phone:	Fax:

Thank you for you interest in our services!

Have you ever filed for Bankruptcy?

() NO () YES

If Yes, Type _____ Date Filed _____

Results of Bankruptcy _____

Have we ever sold to you before or to any present or former affiliate?

() NO () YES If yes, under what name and when _____

Are you listed with Dun & Bradstreet?

() NO () YES If yes, what is your D-U-N-S No. _____ Rating _____

Annual Purchase Estimate

We estimate our annual purchases for your company at \$ _____

We request a credit line of \$ _____

Trade References

Where possible, please provide fax numbers.

We require at least THREE REFERENCES where you have credit established (not prepay accounts).

Company Name:	
Contact Name:	
Title:	Phone:
Email:	Fax:

Company Name:	
Contact Name:	
Title:	Phone:
Email:	Fax:

Company Name:	
Contact Name:	
Title:	Phone:
Email:	Fax:

As a valued client, we welcome the opportunity to open an account for you. We strive to give our customers outstanding products while delivering the best service possible. It typically takes 3-4 business days to process an application; however, some suppliers will only respond in writing which may delay approval.

Authorization

The information in this application submitted in connection herewith is for the purpose of obtaining credit and is represented by the applicant to be true and complete. The applicant authorizes you to investigate all credit references and any other matters pertaining to its financial responsibility. The undersigned authorizes its banks and trade creditors to submit complete information for the purpose of credit evaluation. The undersigned further agrees that payments will be made in accordance with creditors' terms of Net 30 Days. In the event of default in payment, the applicant agrees to be liable for creditors' costs of collection, including reasonable attorney fees and interest due on the past due account.

FIRM NAME _____ DATE _____

BY(printed name) _____ TITLE _____

SIGNATURE _____

Thank you for you interest in our services!