

Eco Finishing  
 5100 Industrial Blvd  
 Fridley, MN 55421  
 Tel: 763-574-1000  
 Fax: 763-574-1605

<b>For Office Use Only</b>
Company Code: _____
Date Account Opened: _____
Sales Rep: _____

## ECO FINISHING CREDIT APPLICATION

### Company Information

<b>Legal Company Name</b>		<b>Trade Name/ D.B.A.</b>	
<b>Billing Address (Street, City, State, Zip Code)</b>		<b>Shipping Address (If different than billing address)</b>	
<b>Telephone Number</b>	<b>Fax Number</b>	<b>Type of Business</b>	
<b>Date Established</b>	<b>No. of Employees</b>	<b>Years at location:</b>	<b>Annual Sales:</b>
		<b>Place of Business: Rent or Own</b>	
<b>Please circle one: Individual    Partnership    Corporation</b>		<b>If Renting, name of Landlord</b>	
<b>Fed. Tax I.D. Number</b>	<b>State of Incorporation</b>	<b>Purchase Order Required?    Yes    No</b>	
<b>Acct Payable Contact:</b>		<b>Tel:</b>	<b>Fax:</b>
<b>Email Address:</b>			
<b>Purchasing Contact:</b>		<b>Tel:</b>	<b>Fax:</b>
<b>Email Address:</b>			
<b>Eco Finishing is a green company and would like to send all forms via email. Please provide the following:</b>			
<b>Invoices: Attn: _____</b>		<b>Email: _____</b>	
<b>Completion Notices: Attn: _____</b>		<b>Email: _____</b>	
<b>Quotes: Attn: _____</b>		<b>Email: _____</b>	

**FOR TAX EXEMPT PURCHASE PLEASE FURNISH YOUR STATE SALES TAX EXEMPTION CERTIFICATE**

<b>Exemption Certificate Attached?</b>	<b>Yes</b>	<b>No</b>	<b>State Sales Tax I.D. Number</b>
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**If purchases are to be shipped rather than picked up, please provide how you would like them shipped. Please NOTE, orders shipped by UPS will be subject to an additional \$10 handling fee.**

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## BANK REFERENCE

<b>Bank Name</b>	<b>Location</b>
<b>Bank Telephone Number</b>	<b>Your Account Number</b>

## PRESENT MAJOR SUPPLIERS / TRADE REFERENCES

<b>Name</b>	<b>Address</b>	<b>Telephone</b>	<b>Fax</b>
<b>Name</b>	<b>Address</b>	<b>Telephone</b>	<b>Fax</b>
<b>Name</b>	<b>Address</b>	<b>Telephone</b>	<b>Fax</b>

## PAYMENT TERMS: NET 30 DAYS – SHIPPING TERMS: F.O.B. FACTORY

Upon approval of this application, a 30-Day account will be opened for your convenience. All payments are due in our office within 30 days of the date of each invoice. There are no discounts for early payment. Applicant agrees that payments will be made based on the terms set forth by ECO Finishing, not as decided by Applicant. If your account becomes past due, we reserve the right to place a "Credit Hold" on your account until it is paid to date. A \$30 charge will be added to any checks returned to ECO Finishing. If failure to pay according to the terms of this Agreement causes this account to be assigned or referred to an attorney for collection, applicant agrees to pay ECO Finishing's reasonable collection and or attorney fees and all court costs. As part of this application for credit, applicant grants permission to ECO Finishing to contact any or all bank and trade references listed above, any additional references which may be provided by the bank and trade references, and to contact any consumer or commercial credit reporting agencies. Applicant consents to the jurisdiction of the Courts of the State of Minnesota. The undersigned hereby certifies that he or she is duly authorized to sign this application on behalf of Applicant, that the information given in this application is true and correct to the best of his or her knowledge and that the Applicant hereby agrees to the foregoing terms and conditions.

<b>Company Name</b>	
<b>Signature</b>	<b>Title</b>
<b>Name (Please print)</b>	<b>Date</b>

### PERSONAL GUARANTEE (REQUIRED FOR INDIVIDUALS AND PARTNERSHIPS)

The undersigned in consideration of Eco Finishing Company extending credit to the above applicant does hereby unconditionally guarantee payment of all indebtedness, liabilities or obligations said applicant at any time owe to Eco Finishing. This guarantee shall be a continuing, absolute and conditional guarantee and shall remain in full force and effect until expressly revoked by a written notice from the undersigned sent by certified mail, return receipt requested and also, until all of said indebtedness, liabilities and obligations created before received such notice shall be fully paid.

<b>Guarantor's Signature</b>	<b>Guarantor's Social Security Number</b>
<b>Home Address</b>	
<b>Home Telephone Number</b>	<b>Date Signed</b>

# Certificate of Exemption

**Purchaser:** Complete this certificate and **give it to the seller.**

**Seller:** If this certificate is not fully completed, you must charge sales tax. Keep this certificate as part of your records.

This is a blanket certificate, unless one of the boxes below is checked, and remains in force as long as the purchaser continues making purchases, or until otherwise cancelled by the purchaser.

Check if this certificate is for a single purchase and enter the related invoice/purchase order # \_\_\_\_\_.

If you are a contractor and have a purchasing agent agreement with an exempt organization, check the box to make multiple purchases for a specific job. Enter the exempt entity, name and specific project:

Exempt entity name \_\_\_\_\_ Project description \_\_\_\_\_

Please print

Name of purchaser \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Purchaser's tax ID number \_\_\_\_\_ State of issue \_\_\_\_\_ Country of issue \_\_\_\_\_

If no tax ID number, enter one of the following: FEIN \_\_\_\_\_ Driver's license number/State Issued ID number \_\_\_\_\_  
state of issue \_\_\_\_\_ number \_\_\_\_\_

Name of seller from whom you are purchasing, leasing or renting \_\_\_\_\_

Seller's address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Type of business

**Type of business.** Circle the number that describes your business.

- |   |                                       |
|---|---------------------------------------|
| 01 Accommodation and food services            | 11 Transportation and warehousing     |
| 02 Agricultural, forestry, fishing, hunting   | 12 Utilities                          |
| 03 Construction                               | 13 Wholesale trade                    |
| 04 Finance and insurance                      | 14 Business services                  |
| 05 Information, publishing and communications | 15 Professional services              |
| 06 Manufacturing                              | 16 Education and health-care services |
| 07 Mining                                     | 17 Nonprofit organization             |
| 08 Real estate                                | 18 Government                         |
| 09 Rental and leasing                         | 19 Not a business (explain) _____     |
| 10 Retail trade                               | 20 Other (explain) _____              |

Reason for exemption

**Reason for exemption.** Circle the letter that identifies the reason for the exemption.

- |   |   |
|---|---|
| A Federal government (department) _____                   | I Industrial production/manufacturing   |
| B Specific government exemption (from list on back) _____ | J Direct pay permit # _____   |
| C Tribal government (name) _____                          | K Multiple points of use (services, digital goods, or computer software delivered electronically) |
| D Foreign diplomat # _____                                | L Direct mail   |
| E Charitable organization # _____                         | M Other (enter number from back page) _____   |
| F Religious or educational organization # _____           | N Percentage exemption  |
| G Resale  | <input type="checkbox"/> Advertising (enter percentage) _____ %                                   |
| H Agricultural production                                 | <input type="checkbox"/> Utilities (enter percentage) _____ %                                     |

Sign here

*I declare that the information on this certificate is correct and complete to the best of my knowledge and belief. (PENALTY - If you try to evade paying sales tax by using an exemption certificate for items or services that will be used for purposes other than those being claimed, you may be fined \$100 under Minnesota law for each transaction for which the certificate is used.)*

Signature of authorized purchaser \_\_\_\_\_ Print name here \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_