



**NEW ACCOUNT CREDIT APPLICATION**

Pollock Orora Sales Professional: \_\_\_\_\_

**AGREEMENT TO BE COMPLETED BY APPLICANT** Date \_\_\_\_\_

Legal Business Name \_\_\_\_\_

Trade Name (s) \_\_\_\_\_

Company Website \_\_\_\_\_

Delivery Address \_\_\_\_\_ Mailing Address \_\_\_\_\_  
(if different)

City, State \_\_\_\_\_ City, State \_\_\_\_\_

Zip \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No \_\_\_\_\_ Fax No \_\_\_\_\_

**KEY CONTACTS**

Purchasing

Name \_\_\_\_\_  
 Phone No \_\_\_\_\_  
 Email \_\_\_\_\_  
 Fax No \_\_\_\_\_

Accounts Payable

Name \_\_\_\_\_

Phone No \_\_\_\_\_  
 Email \_\_\_\_\_  
 Fax No \_\_\_\_\_

**TYPE OF BUSINESS**

CORPORATION  Kind of Business \_\_\_\_\_  
 Indicate Officers \_\_\_\_\_ SIC # \_\_\_\_\_ D&B No \_\_\_\_\_  
 \_\_\_\_\_ # of Years This Business Under Current Ownership \_\_\_\_\_

PARTNERSHIP  Other Locations Currently Owned \_\_\_\_\_  
 Indicate Partners \_\_\_\_\_  
 \_\_\_\_\_

PROPRIETORSHIP  Tax Exempt/Resale # \_\_\_\_\_  
 Indicate Owner \_\_\_\_\_ (Attach copy of certificate)

Line of Credit Requested \_\_\_\_\_  
 Anticipated Monthly Purchase \_\_\_\_\_

**BILLING/DELIVERY REQUIREMENTS**

Deliver on Invoice/ Priced	
Delivery Rec't/Priced	
Invoice Mailed Later	
Deliv. Rec't/No Price	
Invoice Mailed Later	
Number of Invoice	
Copies Required	
Are Purchase Orders	
Required?	

**SPECIAL DELIVERY INSTRUCTIONS**  
*(Day, Time, Place, Dept, Special Handling, etc.)*

**BANK REFERENCES**  
 (Please include complete addresses and telephone numbers)

1. Name of Bank _____ Address _____ City/State/Zip _____ Telephone No _____ Fax No _____ Checking Account # _____ Savings Account # _____ Loan Account # _____	2. Name of Bank _____ Address _____ City/State/Zip _____ Telephone No _____ Fax No _____ Checking Account # _____ Savings Account # _____ Loan Account # _____
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**TRADE REFERENCES**

(Please include complete addresses and telephone numbers)

1. Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone No \_\_\_\_\_  
 Fax No \_\_\_\_\_  
 Account # \_\_\_\_\_

2. Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone No \_\_\_\_\_  
 Fax No \_\_\_\_\_  
 Account # \_\_\_\_\_

3. Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone No \_\_\_\_\_  
 Fax No \_\_\_\_\_  
 Account # \_\_\_\_\_

4. Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone No \_\_\_\_\_  
 Fax No \_\_\_\_\_  
 Account # \_\_\_\_\_

**COMMENTS**

**PLEASE NOTE:** In order for Pollock Orora to consider establishing credit for you, the following conditions must be met:

1. This application must be signed.
2. At least three major trade references and one bank reference must be furnished.

The person executing this agreement has the authority to bind the Applicant and is authorized by the Applicant to enter into the credit application terms and conditions. The applicant hereby authorizes the references listed in this application to provide Pollock Orora with information pertaining to applicant's credit and financial responsibility. The applicant hereby agrees that the information provided above is accurate and true. All invoices are due net 30 days after the date of such invoice. All amounts for purchases from Pollock Orora are payable at Pollock Investments, Inc., P.O. Box 671527, Dallas, TX 75267-1527. Payment term restrictions of COD may be placed on any past due account. The Applicant agrees to pay the account promptly within the terms stated. It is further understood that this agreement is entered into in the state of Texas, county of Dallas and is governed by the laws of the state of Texas. In the event of default, and if this account is turned over to an agency and/ or an attorney for collections, the undersigned agrees to pay all reasonable attorney's fees, and/ or cost of collections whether or not suit is filed. The Applicant agrees to pay late charges equal to the maximum allowed by law, but not to exceed 1.5% per month on any balances 30-days or more past due. All returns deemed non-Pollock Orora errors are subject to a 15% restocking fee, along with any applicable freight charges. All non-stock or special order products are subject to the manufactures restocking policy and applicable fees. The Applicant by executing this credit application hereby agrees to indemnify and save harmless Pollock Orora, its directors, officers, employees, agents, successors and assigns from all claims, damages, demands, suits, liabilities, or causes of action of every kind and nature whatsoever that are a result of misuse of, or damage to, the products purchased from Pollock Orora by the Applicant's employees, agents, and customers.

APPLICANT \_\_\_\_\_  
 Signature Title Date

**FOR OFFICE USE ONLY**

Location No: \_\_\_\_\_ Date: \_\_\_\_\_  
 PPD A/C#: \_\_\_\_\_ Approved By: \_\_\_\_\_  
 Originator: \_\_\_\_\_ Credit Limit: \_\_\_\_\_

