



Credit Application

275 State Road • P.O. Box 820 • Westport, MA 02790
Main Office: (508) 675-7833 / Toll Free (800) 334-4789

Please complete,
sign, and email to
ar@midcitysteel.com

Customer Name _____ Credit Line Requested \$ _____

Billing Address _____ City _____ State _____ Zip _____

Shipping Address _____ City _____ State _____ Zip _____

Telephone: _____ Email: _____ Website: _____

Accounts Payable Contact: _____ Email: _____

How did you hear about us? _____

OWNER(s) or OFFICER(s)

Name	Title	% Ownership	Telephone

TRADE REFERENCES

Vendor Name	Address	Contact	Telephone	Email

BANK REFERENCES

Bank	Account Number	Contact	Telephone	Email

TERMS

Net 30 Days from date of Product Receipt.

- Service Charges are applied at the rate of 1 % per month, 12% per annum, on invoices not paid in accordance with our terms.

SALES TAX

Sales Tax Exemption: **NO** OR **YES**

- If **Yes** - Exempt for: **ALL** OR **PART**
- If **Part** - Please Describe: _____

If tax exempt, please provide a copy of your tax exempt certificate.

- Failure to supply your tax exemption number makes you liable for the sales tax.

By signing below, you state that you understand and agree to our terms of payment and authorize the release of third party information to Mid-City Steel.

Print Name

Signature

Title

Date

FOR OFFICE USE ONLY:

Approved _____ Declined _____ Credit Line \$ _____ Review Date _____

Customer Number _____ Sales Person _____