

Credit Application



7509 South 5th Street, Suite 110 | Ridgefield, WA 98642
machmo.com | 206-925-3785

Business Name _____
Bill to Address _____
City _____ **State** _____ **Zip** _____
Ship to Address _____
City _____ **State** _____ **Zip** _____
Phone# _____ **Website** _____

Owners / Officers:
Name: _____ **Title:** _____
Name: _____ **Title:** _____
SSN # / Fed ID # _____
Sales Tax Exempt. / Resale Cert. # _____

Check One:
_____ **Corp/Public** _____ **Corp/Private**
_____ **Sole Proprietorship** _____ **Partnership**

PLEASE INCLUDE A COPY OF YOUR TAX EXEMPTION CERTIFICATE

Commerical Trade References: (Open Accounts Only)

Company	Address	City	State	Zip	Phone	Email
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Bank Reference:
Name _____ **Account #** _____
Phone # _____
Address _____ **City** _____
State _____ **Zip** _____

Ordering:
Credit Limit Requested \$ _____ **PO Required?** _____
Authorized Buyers _____
Accounts Payable Contact _____
Phone _____ **Email** _____

Authorized Signature **Title** **Date**

Application will not be considered valid unless fully completed and signed by a company official. Typing your name to sign constitutes a legal signature.

We certify that all information contained on this credit application is warranted to be correct. We authorize Mach Motion Products to investigate the credit and financial references we have listed on this form. We agree to pay all invoices within the terms printed thereon. In the event this account is referred for collection services, we agree to pay all reasonable court and collection costs, attorney fees and those of authorized agents. Mach Motion Products reserves the right to deny credit on any application, or deny credit on an open account when transactions have ceased for a period of one year or more.