



## Credit Application & Policy

333 Fayetteville Street, Ste 1490, Raleigh, NC 27601  
Phone: 919-777-2826 | Email: credit@cooperequipment.com

Date: \_\_\_\_\_

### Section 1: Business Information

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

DBA (if applicable): \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Federal Tax ID (EIN): \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Type of Business:  Corporation  LLC  Partnership  Sole Proprietor

Years in Business: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Billing Dept. Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Section 2: Bank & Trade References

Bank Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Trade References (minimum of 3):

1. Company: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Company: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Company: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Section 3: Authorized Representative

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Section 4: Personal Guaranty** (Required for New or Small Businesses)

In consideration of Cooper Equipment extending credit to the above-named applicant, the undersigned personally and unconditionally guarantees payment of all obligations owed to Cooper Equipment, including reasonable attorney's fees and collection costs. This guaranty shall be continuing, absolute, and unconditional.

Guarantor Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

SSN (last 4): \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_