

DOMINION WINDSHIELD REPAIR, Inc.

CORPORATE CREDIT APPLICATION

(703) 768-3510

Confidential - Please print or type

FAX (703) 768-4026

Business Legal Name _____

D.B.A. _____ Date Established _____

Proprietorship Partnership Corporation Purchase Orders Required? Yes No

Street Address _____

City _____ State _____ Zip _____

Billing Address (if different from street address) _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Number of Fleet Vehicles _____ DUNS Number (if known) _____

Corporate Officers

Corporate Officers, Titles & Residence Addresses

Trade References

Name _____ Account Number _____ Phone _____

Name _____ Account Number _____ Phone _____

Name _____ Account Number _____ Phone _____

Bank Name _____ Account Number _____

City/State _____ Phone _____

TERMS AND CONDITIONS NET 30 DAY ACCOUNT: To maintain your credit status, accounts must be paid by the due date. 1.5% FINANCE CHARGE (ANNUAL PERCENTAGE RATE: 18%) per month will be added to any past due balance. A minimum FINANCE CHARGE of \$1.00 will be assessed for any billing period in which a finance charge of less than \$1.00 is due. Customer agrees to pay reasonable collection and attorney fees in the event account becomes delinquent. Dominion Windshield Repair, Inc., P.O. Box 30521, Alexandria, VA 22310

By signing below, you certify that all the information provided in this application is true and correct, you are authorized to sign this application on behalf of the applicant and you agree to be bound by the **Terms and Conditions for the Dominion Windshield Repair, Inc. 30-Day Account.**

Print Name _____ Title _____

Signature _____ Date _____