

**Flow Ezy Filters, Inc, CUSTOM FILTER DIVISION**  
 5741 Jackson Rd, Ann Arbor, MI USA 48103  
 phone (888) 335-3774 or (734) 665-3772; fax (734) 665-3023  
 e-mail: jroberts@customfilterandstrainer.com

**APPLICATION FOR CREDIT**

**NAME OF BUSINESS (Billing Address):**

Name:	Phone:
Street of P.O. Box:	Fax:
City, State/Province, Postal Code:	
Dun & Bradstreet No:	Tax ID No:

**Ship To Location:**

Street:
City, State/Province, Postal Code:

**Form of Business:**

**(check appropriate box)**

Proprietorship:	
Corporation:	

Partnership:	
Other (explain):	

**SSN of Owner & Date of Birth (if other than a corporation):**

Owner's Full Name:
Length of Time Company Has Been In Business:

**Accounts Payable:**

Person to Contact:	Title:	Phone:
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**Bank Reference:**

Bank Name:	Branch:	
Bank Address:		
Bank Contact:	Title:	Phone:
Bank Account No:		

**Trade Reference (those within the fluid power, filtration, or manufacturing industry)**

Name:	Contact:	Phone:
Address:		
City, State/Province, Postal Code:		Fax:

Name:	Contact:	Phone:
Address:		
City, State/Province, Postal Code:		Fax:

Name:	Contact:	Phone:
Address:		
City, State/Province, Postal Code:		Fax:

**THIS IS NOT A PERSONAL GUARANTEE:**

I hereby represent that I am authorized to submit this application on behalf of the customer named above, and that the information provided is for the purpose of obtaining credit and is warranted to be true. I / we hereby authorize Flow Ezy Filters, Inc, Customer Filter Division to investigate the references listed pertaining to my / our credit and financial responsibility. It is agreed and understood that all necessary collection and legal expenses and interest (at 4% per year), may be charged to debtor in the event of default or failure to pay for goods sold and delivered. I / we further represent that the customer applying for credit has the financial ability and willingness to pay all invoices within established terms. **ALL INFORMATION MUST BE COMPLETED.**

Signature:	Title:	Date:
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**EXEMPT ORGANIZATION SALES TAX CERTIFICATE NO:**

WEB SITE ADDRESS (URL):
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