**McNeely Plastic Products** 

Phone: (601) 926-1000

1111 Industrial Park Dri Clinton, Ms. 39056		Fax: (601) 926-1010
J	Bill To:	
Customer Name		Phone
	State	
	Ship To (if different from ab	ove)
Customer Name		
		Zip
	Key Information	
Business Start Dat <u>e</u>	No. Emp.'s Corporation	Partnership Proprietorship Other
ederal Tax ID	Resale No.	Direct Pay Permit No.
0&B No.	Owner's Name & SS#	
Controller Contact		
A/P Contact		
(must I	nave name, phone number and email ad	dress)
	Bank Reference	
Bank Name		Account No.
Address		
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Address Phone		Email
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Signature	Date	Title
	MCNEELY'S USE ONLY	
Requested By:	Amount of Credit Needed	

I/We certify the foregoing information has been supplied truthfully, accurately, and voluntarily and therefore authorize McNeely Plastic Products, Inc. to investigate my/our credit worthiness, credit history and financial responsibility through any credit bureau or by any other reasonable means, including direct contact with past and present creditors.

I/We further understand that payments terms are NET 30 (unless otherwise indicated on invoice), and I/We agree to make payments promptly in accordance with terms.

It is fully understood by the applicant and each maker, surety or endorser here on this application that each jointly and severally waives grace, demand, presentment, notice, protest and consents that time of payment may or may not be extended without notice. The credit applicant herein indicated fully agrees to pay all interest or finance charges (not to exceed 9.9% annually) as stipulated on the invoice. It is specifically agrees and stipulated that if this matter consisting of unpaid charges supported by invoices and accrued interest charges in place in the hand of an attorney or any other party for collection, or collected through suit, probate or bankruptcy proceedings, we jointly and severally agree to pay any and all reasonable fees, attorneys fees and all costs as may be awarded in addition to the principle and interest due at the time of collection of payment or said principle and interest in full.

Print Name

Authorized Signature

Title

Date

Please sign below. Application must be signed to be valid.