



# M. HOLLAND COMPANY

400 Skokie Blvd., Suite 600, Northbrook, IL 60062 (847) 272-7370 Fax (847) 849-5948 Toll Free (800) 872-7370 credit@m-holland.com

## CREDIT APPLICATION

LEGAL COMPANY NAME: \_\_\_\_\_

REGISTERED DBA NAME: (If Applicable) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_ ZIP: \_\_\_\_\_

FEIN #: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ANNUAL SALES: \_\_\_\_\_ COMPANY WEBSITE: \_\_\_\_\_

REQUESTED CREDIT AMOUNT: \_\_\_\_\_ LINE OF BUSINESS: \_\_\_\_\_

YEAR COMPANY ESTABLISHED: \_\_\_\_\_ CURRENT OWNERSHIP CONTROL YEAR: \_\_\_\_\_

ORGANIZATION TYPE (Circle One) Proprietor C-Corp. S-Corp. Partnership LLC LLP OTHER \_\_\_\_\_

Have you ever done business with M. Holland Company before? YES or NO

If yes, under what name? \_\_\_\_\_

## COMPANY PRINCIPALS/OFFICERS

PRESIDENT: \_\_\_\_\_ % OWNERSHIP: \_\_\_\_\_

CFO: \_\_\_\_\_ % OWNERSHIP: \_\_\_\_\_

CONTROLLER: \_\_\_\_\_ % OWNERSHIP: \_\_\_\_\_

## TRADE REFERENCES

VENDOR 1: \_\_\_\_\_ CONTACT: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

VENDOR 2: \_\_\_\_\_ CONTACT: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

VENDOR 3: \_\_\_\_\_ CONTACT: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

M. Holland Company's standard terms are Net 30 days from invoice date.  
All other terms must be approved by M. Holland Company.

If tax-exempt, please provide a copy of the certificate.

**FINANCIAL STATEMENTS REQUESTED FOR ALL LINES OVER \$100,000**



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### BANK REFERENCES

NAME: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ACCT # \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ LOAN OFFICER: \_\_\_\_\_

NAME: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ACCT # \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ LOAN OFFICER: \_\_\_\_\_

### TERMS AND CONDITIONS

I hereby certify that the information contained herein is true and correct. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended by M. Holland Company (MHCO). MHCO is hereby authorized to obtain any information it may consider necessary from any source to obtain credit. This signed application is also consent to release information to MHCO in order to evaluate the applicant's creditworthiness. In consideration of and in order to establish a line of credit, applicant promises to pay for all purchases in accordance with MHCO's terms and conditions of sale as disclosed upon its invoice. Should a default in payment occur, applicant agrees to pay all reasonable and customary collection and/or legal fees incurred to collect the debt. The customer will reimburse MHCO for any bank fees assessed to MHCO for checks returned by the customer where they have insufficient funds to cover the payment. The undersigned warrants that he/she has authority to execute this open account agreement and to bind said company to the terms and conditions contained in this application. I further acknowledge that if open credit terms are granted, those said terms may be withdrawn at any time.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM:

COMPANY NAME: \_\_\_\_\_

AUTHORIZED SIGNATURE: (Required) \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

M. HOLLAND COMPANY SALES REPRESENTATIVE (If known): \_\_\_\_\_