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[www.lundellplastics.com](http://www.lundellplastics.com)

Dear valued customer,

Thank you for applying for credit status with Lundell Plastics Corporation. Enclosed you will find the application sheets. Please fill them out completely and return them to our office. Note that we require fax numbers for all of your references, including your bank. Your email address is required for the purpose of sending invoices and statements. Please remember to fill out the forms completely. The requested information is essential for processing your application. The Application for Credit and Reference Permission Forms should be signed, dated, and returned with your reference sheet.

Due to the lengthy process of approving a credit application, we require that your first order be paid for by credit card or paid in advance by check. When your credit application has been approved or denied, you will receive notification by mail along with our current pricing sheets.

Thank you for your business. We look forward to working with you.

Lundell Plastics Corporation

Enclosures



# APPLICATION FOR CREDIT

Credit Terms- Net 30

All fields required. The following information must be completed in full and will be held in the strictest confidence.

APPLICANT

Name of business or individual

Telephone

Address

Fax

City

State

ZIP

No. of years at this address

Nature of business

E-mail address (for receiving invoices and statements)

Website

OWNERSHIP

Corporation  Partnership  Individual  check here if incorporated within the last 12 months

Name(s) of Principal(s)

Address

City

State

ZIP

Phone

FINANCE

Bank Name

Bank Officer or Department

Bank Address

City

State

ZIP

Phone

Fax

REFERENCES

1

Business Name

Business Address

City

State

ZIP

Phone

Fax

2

Business Name

Business Address

City

State

ZIP

Phone

Fax

3

Business Name

Business Address

City

State

ZIP

Phone

Fax

We certify that all information on this form is correct; and that we fully understand your credit terms and agree to the proper payment in consideration of extended credit.

(signed)

Date

Title

\* If you are sending your company's own reference sheet please make sure that all of the above required fields are included. This form must also be signed, dated, and returned along with your reference sheet.



# REFERENCE PERMISSION FORM

To obtain account /credit information from your bank

**All fields required.** The following information must be completed in full and will be held in the strictest confidence.

APPLICANT

_____ Name of Account Holder		_____ Telephone	
_____ Address		_____ Fax	
_____ City	_____ State	_____ ZIP	_____ Today's Date

Account Number(s) (Optional: Complete only if your bank requires this information.)

BANK INFORMATION

PLEASE REFERENCE ALL ACCOUNTS:

_____ Bank Name		_____ Telephone	
_____ Bank Address		_____ Fax	
_____ City	_____ State	_____ ZIP	

I hereby give my permission for Lundell Plastics Corporation to check my business and/or personal bank accounts for the purpose of establishing credit with Lundell Plastics.

\_\_\_\_\_  
(signed) Date Title