

TUBULAR PRODUCTS





CONFIDENTIAL CREDIT APPLICATION

D-U-N-S Number			
Company Name			<u> </u>
Billing Address	City	State	Zip
Shipping Address	City	State	Zip
Type of Business	Date Established		_
Estimated Monthly Purchases	Credit	Line Requested	
A/P CONTACT NAME	A/P EMAIL ADI	DRESS	
Management			
Key Management Members and/or Own Name and Title:	Email address:	Telephon	e:
			<u>_</u>
Bank Reference			
Name	Address		
City	State	Zip	_
Phone	Officer	Account Numb	er
Trade References (Three please) Name	Fax	Phone	
	-		_
The above information is provided in con 10, Net 30. To the best of our knowledge decision. We authorize our bank to furni consideration of an extension of credit, t court costs and collection agency fees, in agreement whether on not a suit is filed.	e and belief, this information is acci sh you any information necessary t he Buyer agrees to pay all costs inc the event the Seller commences a	urate and may be relied up to complete your evaluatio luding, but not limited to, i	on in making your credit n of our credit history. In reasonable attorney fees,
Authorized Signature	Title	e	Date

RETURN TO Suzanne Evans - CREDIT DEPT. VIA FACSIMILE 205/251-9307 OR E-MAIL Suzanne.evans@southlandtube.com.