



NATIONAL PIPE HANGER CORPORATION

CORPORATE HEADQUARTERS - 200 CAMPUS DR, MOUNT HOLLY, NJ 08060 TEL: (609) 261-5353 FAX: (609) 261-3249
MD OFFICE - 15850 COMMERCE CT, SUITE P, UPPER MARLBORO, MD 20774 TEL: (301) 568-8805 FAX: (301) 967-1456
E-MAIL: SALES@NATIONALPIPEHANGER.COM WEBSITE: WWW.NATIONALPIPEHANGER.COM

Business Credit Application

All Sections Are Required*

Business Name: _____ Phone Number: _____

Billing Address: _____ Fax Number: _____

City: _____ State: _____ Zip: _____ Street Address: _____

Company Website: _____ City: _____ State: _____ Zip: _____

A/P Contact Name: _____ A/P Email: _____

Invoices will be sent electronically.

TERMS: 2% 10, NET 30 General Business Information

Type of Business: _____ Officer's Name & Title: _____

How long has applicant been at present location?: _____ Officer's Name & Title: _____

How long has applicant been in business?: _____ Officer's Name & Title: _____

Bank Reference

Bank Name: _____ Phone Number: _____

City: _____ State: _____ Zip: _____ Fax Number: _____

Business Credit Reference

INFORMATION TO BE HELD IN CONFIDENCE

Company: _____ Phone Number: _____

City: _____ State: _____ Zip: _____ Fax Number: _____

Company: _____ Phone Number: _____

City: _____ State: _____ Zip: _____ Fax Number: _____

Company: _____ Phone Number: _____

City: _____ State: _____ Zip: _____ Fax Number: _____

Applicant certifies that the above information is true and correct. Applicant also represents and agrees (1) that invoices are net and due 30 days from the invoice date, (2) that any invoiced amounts not paid within 30 days after the date due shall bear interest at the maximum non usurious rate permitted by law (currently 18% per annum) from the date due until paid, (3) to pay any and all costs of collection (including without limitation reasonable attorney's fees) incurred by National Pipe Hanger Corporation in collecting any overdue account, and (4) that you are authorizing National Pipe Hanger Corporation to contact the above references in determining whether to extend credit to applicant, and to report information regarding applicant's account.

*You may send your own company credit sheet to satisfy the Bank Reference and Business Credit Reference section.

Note: Please send copy of Tax Exemption Certificate if applicable. Tax will be added until Tax or Resale Certification is provided.

Return Completed Application To:

National Pipe Hanger Corporation
200 Campus Drive
Mount Holly, NJ 08060
Attn: Demitra Adamopoulos, Accounts Receivable Administrator
Email: demitraadamopoulos@nationalpipehanger.com
Acct. Fax: (609) 261-3096

Signature: _____

Name: _____

Title: _____

Date: _____

Referring Salesman: _____