

Agent Name_

CREDIT APPLICATION

Signal Hill, CA 90755 Credit Tel. 844-872-4263 Credit Fax 844-800-5096 accounting@glacierpac.com www.glacierpac.com

DBA/ Trade name	7					
•	tion: Check one bel	low Date	/State established as	legal entity		
Corporation	Partnership	Limited Liability	Proprietorship			
Billing Address:			Physi	cal Address:		
				<u> </u>		
Telephone :				Fax :(]	
Ownership/Officers	/Business Information	on (Ownership Required)		- T. W. T. (1	
Name:			Title			Owns%:
Name:			Title			Owns%
Name:			Title			Owns%
Name:			Title			Owns%
A/P Contact Name	::			A/P Phone: (_)	
Bank Reference:			Sec	ondary Bank:		
-						
Phone:				one:		
Trade References						
,						
				te:		
-				•		_
				te:		
5) Name:						
Phone:			Phone:			
City/State			City/Sta	te:		
our terms. The A information, dep consumer/comn	Applicant grants posit, demand, in nercial credit reps. The Applicant	permission to Glacier evestment, borrowing, porting agencies and t	r Pac, Inc., its affili historical relation the above listed ba	ates and its agent, ship and financial a ank and trade refere	New York Credit, and financial coven ences for the purpo	ants from

The Agent signing this agreement has the authority to bind the Applicant and is authorized by Applicant to enter into the credit application terms and conditions. The Applicant agrees to pay interest; collection and attorney/legal fees upon default of any obligation, in addition to, Glacier Pac, Inc. may apply an interest charge at the rate of one and one half percent (1.5%) per month compounding or the highest rate permitted by law on the unpaid total balance and \$30 return fee on each dishonored payment.

__Signature __

Please return to the Credit Office fax 844-800-5096 or Email accounting@glacierpac.com