



Main/International No. (712)732-2760
 U.S. and Iowa No. (800) 831-6962
 Canada No. (800) 888-7059
 Fax No. (712) 732-4401
 U.S. Fax No. (800) ANY FLOW
 http://www.merrillmfg.com

Merrill Manufacturing Co. - PO Box 392 - Storm Lake, Iowa 50588
 UNITED STATES CREDIT APPLICATION - COMPLETELY FILL OUT FOR CREDIT TO BE ESTABLISHED

DATE _____ SUBMITTED BY _____

BUSINESS NAME _____ FED. I.D. # _____

SHIP TO ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE # _____ FAX # _____ E-MAIL _____

MAIL _____ BILLING ADDRESS (IF DIFFERENT FROM ABOVE) _____

NAME OF OWNER/PRES. _____

SOCIAL SECURITY NO. OF OWNER/PRES. _____

NAME OF PURCHASING AGENT _____

TYPE OF BUSINESS: WHOLESALE RETAIL O.E.M.

NAME OF ACCOUNTS PAYABLE MANAGER _____

POTENTIAL VOLUME - MONTHLY _____ YEARLY _____

IS YOUR COMPANY LISTED WITH DUNN & BRADSTREET - YES _____ NO _____ YRS. IN BUSINESS _____

DO YOU HAVE AN OUTSIDE SALESMAN - YES _____ NO _____ IF YES, HOW MANY _____

WHAT AREAS DO THEY COVER? _____

ARE YOU A DISTRIBUTOR? _____ DO YOU HAVE A WAREHOUSE? _____

DO YOU INSTALL ANY OF THE PRODUCTS YOU PURCHASE? _____

DO YOU HAVE A WEBSITE? _____ IF SO, PLEASE LIST IT. _____

BANK REFERENCE:

Bank Name _____ **Account No.** _____

Address _____

City _____ **State** _____ **Zip** _____

Person to Contact at Bank _____ **Phone #** _____ **FAX #** _____

NOTE:
 CREDIT
 REFERENCES
 ON BACK

I, _____ give my authorization to release the information requested
 by Merrill Mfg. Co.
 (Must be Signed) X _____

SIGNATURE OF CREDIT APPLICANT

THIS SPACE FOR MERRILL USE ONLY - DO NOT WRITE IN THIS SPACE

Account age _____ Savings _____ #Figures _____ Par Report _____ Date _____
Checking _____ #Figures _____ Loans _____ * CSC Report _____ Date _____
Outstanding - Y _____ N _____ #Figures _____ * Credit _____
Overall Relationship _____

Merrill account classification for mailing list _____
Salesperson _____

Payment terms # _____
Pricing Code # _____

Form No. 2055.1 5/2005

MERRILL MANUFACTURING CO. - UNITED STATES CREDIT APPLICATION

PAGE 2

1st CREDIT REFERENCE:

Business Name _____
Address _____
City _____ State _____ Zip _____
Business Phone # _____ FAX # _____
Purchased their product for how long? _____

THIS SPACE FOR MERRILL USE ONLY - DO NOT WRITE IN THIS SPACE

Account Age _____ Terms _____ High credit _____ Phone _____
Current _____ Pay Record _____ Discount Y _____ N _____ FAX _____
Slow Y _____ N _____ # of Days _____ Mail _____

2nd CREDIT REFERENCE:

Business Name _____
Address _____
City _____ State _____ Zip _____
Business Phone # _____ FAX # _____
Purchased their product for how long? _____

THIS SPACE FOR MERRILL USE ONLY - DO NOT WRITE IN THIS SPACE

Account Age _____ Terms _____ High credit _____ Phone _____
Current _____ Pay Record _____ Discount Y _____ N _____ FAX _____
Slow Y _____ N _____ # of Days _____ Mail _____

3rd CREDIT REFERENCE:

Business Name _____

Address _____

City _____ State _____ Zip _____

Business Phone # _____ FAX # _____

Purchased their product for how long? _____

THIS SPACE FOR MERRILL USE ONLY - DO NOT WRITE IN THIS SPACE

Account Age _____ Terms _____ High credit _____ Phone _____

Current _____ Pay Record _____ Discount Y _____ N _____ FAX _____

Slow Y _____ N _____ # of Days _____ Mail _____