



Finishing & Testing Laboratories

APPLICATION FOR CREDIT

COMPANY NAME

\_\_\_\_\_  
Name of firm or Individual

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Yrs at Location

\_\_\_\_\_  
City State Zip Phone Fax

Hereby applies for credit in accordance with the terms and conditions of:

**P.M. Testing Laboratory, Inc.**  
**3921 Pacific Hwy E**  
**Tacoma, WA 98424**  
**Phone: (253) 922-1321**  
**Fax: (253) 922-1329**

The following information must be provided and will be held in strict confidence.

OWNERSHIP

Corporation Partnership LLC Sole Proprietor/Individual  
Non-Profit Other \_\_\_\_\_

**Federal Tax ID#**

**Purchase for Resale?** Yes No If yes, please provide Reseller  
Certificate.

\_\_\_\_\_  
Officer/Partner/Member/Owner Phone

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Accounts Payable Contact Phone



## Finishing & Testing Laboratories

### BANKING

_____	_____	_____
Bank	Contact	Phone
_____	_____	_____
Address	City	State Zip

### CREDIT REFERENCES

_____
Business name, Address, Phone
_____
1.
_____
2.
_____
3.
_____

**We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment of extended credit. Signer acknowledges having sufficient authority to execute this application on behalf of the firm or individual applying for credit.**

_____	_____	_____
Signature	Title	Date

### **P.M. Testing Laboratory, Inc. Credit Terms & Conditions**

Please note that it has always been our policy to maintain Net 30 terms with all of our customers. We reserve the following rights: (i) to assess a 1.5% service fee monthly on those unpaid invoices over 45 days outstanding; (ii) to restrict the ability to place new orders while there are unpaid invoices over 45 days outstanding; (iii) to rescind credit terms at our sole discretion.