

**GENCO CHEMICALS INC.**

MAILING ADDRESS: PO BOX 1825, MYRTLE BEACH, SC 29578  
PHYSICAL ADDRESS: 1560 PINE ISLAND ROAD, SUITE G, MYRTLE BEACH, SC29577  
843-448-4127 OFFICE / 843-448-4789 FAX

**APPLICATION FOR CREDIT**

DATE: \_\_\_\_\_ SALESPERSON: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

FEDERAL ID OR SOCIAL SECURITY NUMBER: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ FAX: \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: \_\_\_\_\_

(COUNTY IN WHICH SHIPPING ADDRESS IS LOCATED)

\_\_\_\_\_  
COMPANY EXECUTIVE CONTACT FOR FINANCIAL INFORMATION TITLE

\_\_\_\_\_  
ACCOUNTS PAYABLE CONTACT TITLE EMAIL

**IF YOU PREFER RECEIVING YOUR INVOICES AND STATEMENTS VIA EMAIL, PLEASE PROVIDE THE A/P EMAIL.**

COMPANY STRUCTURE: CORPORATTION \_\_\_ PARTNERSHIP \_\_\_ DIVISION \_\_\_ SUBSIDIARY \_\_\_

IF PARTNERSHIP, GIVE NAMES & ADDRESSES OF PRINCIPALS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CREDIT REFERENCES**

\_\_\_\_\_  
BANK NAME BANK OFFICER

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY STATE ZIP PHONE# ACCOUNT NUMBER

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## TRADE REFERENCES (UTILITY COMPANIES NOT ACCEPTED AS REFERENCES)

<u>NAME</u>	<u>ADDRESS</u>	<u>AREA CODE &amp; TELEPHONE #</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

### REQUEST FOR RELEASE OF INFORMATION REGARDING CREDIT TO GENCO, INC.

I HEREBY AUTHORIZE ANY PERSON, FIRM, BANK OR CORPORATION TO FURNISH ON REQUEST TO GENCO INC., INFORMATION CONCERNING OUR APPLICATION FOR CREDIT WITH THEIR FIRM.

\_\_\_\_\_  
SIGNATURE AND TITLE

\_\_\_\_\_  
NAME OF BUSINESS

METHOD OF PAYMENT- CUSTOMER PROMISES TO PAY GENCO INC. FOR THE ITEMS PURCHASED WITHIN 30 DAYS FOLLOWING PURCHASE OF ITEMS.

**ALL APPROVED CREDIT ACCOUNTS ARE SUBJECT TO A 1.5% LATE CHARGE TO BE ASSESSED ON ALL INVOICES 30 DAYS OR MORE PAST DUE.**

IF THIS ACCOUNT IS PLACED IN THE HANDS OF AN ATTORNEY FOR COLLECTION, I AGREE TO PAY A REASONABLE ATTORNEY FEE OF ONE-THIRD OF THE ACCOUNT BALANCE, PLUS COURT COSTS.

FOR AND IN CONSIDERATION OF THE ACCEPTANCE OF THIS CREDIT ACCOUNT BY GENCO INC., THE UNDERSIGNED IS AN AUTHORIZED AGENT WITH AUTHORITY TO ACT ON BEHALF OF THE COMPANY IN ESTABLISHING CREDIT.

ACCEPTED BY OWNER OR AUTHORIZED AGENT

\_\_\_\_\_  
SIGNATURE & TITLE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
CORPORATE OFFICE/AUTHORIZED AGENT

(BOTH FRONT AND BACK MUST BE COMPLETED BEFORE APPLICATION WILL BE PROCESSED)