Smith Midland Corporation and Subsidiaries
P.O. Box 300
Midland, VA 22728

Credit Application

Check Location(s):

☐ Smith Midland – Virginia ☐ Smith –Carolina NC ☐ Smith –Columbia SC ☐ Concrete Safety Systems ☐ EasiSet Industries/Adventures

*****IMPORTANT: references will be obtained via email only. Please provide correct email address for the appropriate contact at each company***.**

Business Information:

Applicant's Legal Name:_____ DBA: _____

Street Address:_____

_____

City State Zip

Phone Number:_____Fax Number:_____E-Mail Address_____

Job Contact:_____PO's required: _____ yes _____ no

Accounts Payable Contact:_____Phone Number:_____E-Mail:_____

Billing Address if different from above:_____

_____

Additional Notes:

_____

Credit Limit Requested (required):_____**Estimated Annual Purchases**:_____

Business Type: Corporation ◯ Nonprofit ◯ Partnership ◯ Proprietorship ◯ Other ◯
(Please circle one)

Dun & Bradstreet #_____

Federal ID# or Social Security# (required):_____**Years in Business:**_____

Nature of Business_____

Names and Titles of Officers_____

CEO President

_____

Secretary Treasurer Controller

Bank References:_____

Name Address

_____

City State Zip Code Account #

Contact Person:_____ Phone Number:_____ Email Address:_____

Trade References:

1._____

Company Name Address City State Zip

_____

Contact Person Phone Number Email Address

2._____

Company Name Address City State Zip

_____

Contact Person Phone Number Email Address

3._____

Company Name Address City State Zip

_____

Contact Person Phone Number Email Address

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for to verify the information contained herein.
To speed up the approval process, all information **must** be completed. It normally takes 1-3 days for the approval process to be completed.

Thank You

Signature:_____ Title:_____ Date:_____

Credit Account Terms

IN COMPLETING THIS APPLICATION FOR CREDIT, WE HEARBY AGREE THAT ALL AMOUNTS ARE PAYABLE WITHIN 30 DAYS OF THE INVOICE DATE. IF THE INVOICE IS NOT PAID ON THE SAID DATE, THE INVOICE WILL BE VIEWED AS DELINQUENT. FURTHER WE AGREE TO PAY A DELINQUENCY FEE OF 1.5% PER MONTH ON ANY AMOUNT WHICH IS PAST DUE.

PURCHASE ORDERS WILL BE ACCEPTED AS LONG AS NO TERMS OTHER THAN THOSE SET FORTH BY IN THIS AGREEMENTARE INCLUDED ON THE PURCHASE ORDER.

SMITH MIDLAND AND IT SUBSIDIARIES MUST BE NOTIFIED IN WRITING OF ANY DISPUTE RELATING TO PRODUCT OR SERVICES WITH 10 DAY OF DELIVERY.

ALL RETURNED CHECKS WILL BE CHARGED A NSF FEE. THE NSF FEE WILL BE THE MAXIMUM AMOUNT ALLOWED BY THE STATE IN WHICH THE CHECK IS PAID. AFTER WHICH YOUR ACCOUNT MAY BE PLACED ON A “CASH ONLY” BASIS.

IF CREDIT IS GRANTED, WE THE UNDERSIGNED AGREE TO THE TERMS SET FORTH ABOVE. WE HEREBY GUARANTEE THE PAYMENT OF ALL OBLIGATIONS TO SMITH MIDLAND CORPORATION AND ITS SUBSIDIARIES UNTIL WITHDRAWN BY CERTIFIED MAIL. WE RECOGNIZE THAT THE CREDIT LINE MAY INCREASE OR DECREASE AT THE DISCRETION OF SMITH MIDLADN CORPORATION AND IT SUBSIDIARIES AT ANY TIME. I FURTHER AGREE THAT SHOULD THE ACCOUNT BE PLACED FOR COLLECTION DUE TO NON-PAYMENT, I WILL BE RESPONSIBLE FOR ALL REASONABLE ATTORNEY / COLLECTION FEES.

ANY PAYMENTS MADE BY CREDIT CARD WILL INCUR A 3% PROCESSING FEE.

Once completed, please email to: accountsreceivable@smithmidland.com Questions, Please Call 540-439-3266