



ENVIRONMENTAL HAZARDS SERVICES

BTS LABORATORIES

7469 Whitepine Road, Richmond, Virginia 23237

PH: 800-604-1995 FAX: 804-275-3700



APPLICATION FOR CREDIT

Date: _____ FORM COMPLETED BY: _____

Company Name: _____ Franchise affiliation (if applicable): _____

Address: _____

Phone () _____ Fax: () _____ Number of years in business: _____

Corporation Partnership Other Number of Employees: _____ Credit Line Required: _____

President/Owner: _____ Chief Financial Officer: _____

A/P Manager: _____ Are purchase orders required: Yes No

TRADE REFERENCES

Company: _____ Phone: () _____ Fax: () _____

Address: _____ Account Number: _____

Company: _____ Phone: () _____ Fax: () _____

Address: _____ Account Number: _____

Company: _____ Phone: () _____ Fax: () _____

Address: _____ Account Number: _____

AGREEMENT

I, _____, understand and agree that approval of this application grants our company 10 day net terms, and that payment will be made in accordance with those terms. Buyer shall also reimburse company for all cost and expenses including reasonable attorney's fees incurred in collecting amounts due.

Signature (officer of company)



PLEASE NOTE: IF THIS FORM IS NOT FILLED OUT COMPLETELY, IT WILL BE RETURNED OR CREDIT MAY BE DENIED.