Confidential Credit Application

1550 W. Mockingbird
Dallas, TX 75235
Fax: 800-563-9908

Firm Name | Phone | Fax

Mailing Address | City | State | Zip

Shipping Address | City | State | Zip

☐ Corporation ☐ Partnership ☐ Proprietorship ☐ Subsidiary ☐ Branch Location

If Subsidiary or Branch, Name and Address of Parent Company:

P.O. Required ☐ Yes ☐ No Federal Tax ID #:

Year Established | Under Present Ownership Since | Can You Supply a Current Financial Statement? ☐ Yes ☐ No

Sales tax will be charged unless a properly completed Sales Tax Exemption or Resale form is attached.

Officers/Owners Names	Title	Home Address	Social Security Number

Email Address

Store Manager | Accounts Payable Contact | Phone

Bank Reference (Name & Branch) | Address

Name of Account Officer | Account # | Phone

Printer Vendor References

Name _____ City/State _____ Credit Limits _____ Terms _____.

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The PRINTING TRADE CUSTOMS of the Printing Industry of America, Inc. apply except where otherwise stated. Payment terms shall be whatever is set forth in quotation or on the invoice unless otherwise stated in writing. All orders are subject to acceptance by Taylor Publishing Company. Terms and conditions may be modified from those stated on this agreement per written contract between the Applicant and Taylor Publishing Company. Terms and conditions of sale are subject to change by written notification of Taylor Publishing Company.

Personal Guarantee: In consideration of any credit extended, I personally guarantee full and prompt payment of all indebtedness of the above named debtor incurred for merchandise and/or services furnished by Taylor Publishing Company, plus all collection cost, a reasonable attorneys fee and all court cost if placed for collection. I hereby waive notice of acceptance, default and exemption. Such guarantee shall remain in force until its revocation is acknowledged in writing by Taylor Publishing Company and such revocation shall not affect indebtedness incurred prior to receipt of written notice.

Individual _____

Signature | Home Address | Social Security Number | Phone

Individual _____

Signature | Home Address | Social Security Number | Phone

I have read, understand and accept the above terms and terms and conditions of sale, I have provided true and correct information to the best of my knowledge. I further authorize Taylor Publishing Company to verify any and all references given, to include, but not limited to, trade and bank references and commercial/consumer credit reporting agencies that may be required to determine our credit capabilities. I promise full and prompt payment of all indebtedness incurred for merchandise and/or services furnished by Taylor Publishing Company. I agree to pay all costs of collections, including a reasonable attorney's fee and all court costs if it becomes necessary to place this account for collection. I hereby waive notice of acceptance, default and exemption. Jurisdiction for any dispute shall be Travis County, Texas

Applicant _____ _____

Signature and Title of Authorized Officer/Owner | Date