



MASCO

AVIONICS • INSTRUMENTS • ACCESSORIES

CREDIT APPLICATION

Name of Firm or Individual

Address

City

State & Zip

(Area Code) Telephone

Fax

Sales Tax Permit Number

Type of Ownership:

____ Corporation

____ Partnership

____ Individual

____ Number of Years in Business

____ Number of Years at This Address

____ Check if Incorporated Within Last 12 Months

List All Principals (Include Address and Telephone Number)

Bank References

Name of Bank

Name of Bank

City & State

City & State

Telephone Number & Fax

Telephone Number & Fax

Number of Years at the Bank

Number of Years at the Bank

Commercial Acct Number

Commercial Acct Number

Name of Bank Officer

Name of Bank Officer

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U.S. Aviation Trade References
(Include Address and **FAX** Number *and/or* EMAIL)

850 S. Dooley St., Grapevine, TX 76051 / Telephone 817-481-8205 Fax 817-488-8918
1344 Smede Highway, Broussard, LA 70518 / Telephone 337-364-0789 Fax 337-364-9992



- 1. _____

- 2. _____

- 3. _____

I fully understand that Masco’s credit terms are net, payable within 30 days from the date of the invoice. I agree to payment terms in consideration of extended credit. Outstanding balances are subject to 1 ½% per month interest. Applicant agrees to pay any collection costs incurred to collect the account balance, including court costs, collection fees and attorney’s fees of not less than 33% of the unpaid principal and interest. As an inducement to grant credit, the undersigned agrees to the need for verification of all information on this application and authorizes and releases all banks, businesses and persons identified on this application to furnish any and all information requested by **Masco Service Corp.** by telephone or written correspondence. The undersigned warrants that the information is true and correct. As an inducement to grant credit, the undersigned agrees that **Masco Service Corp.** has the right to obtain the credit history of the undersigned and authorizes the release of such information by signature here.

Signature

Print Name

Title

Date

(MASCO ACCOUNTING CONTACT: THERESA PARHAM,
ACCOUNTING@MASCOSERVICE.COM)