

CREDIT APPLICATION, page 1 of 3. Print this page, then [Click for Page 2.](#)

I. COMPANY INFORMATION. Monthly Credit Desired: _____

Company Name: _____

Phone: _____ **Fax:** _____

Billing Address and Ship to Address (if different):

Type of Business: _____ **Years Established:** _____

Legal Business Entity: ___ Proprietorship ___ Partnership ___ Corporation

Owner(s)/Officer(s) Name(s) & Title(s):

II. BANK INFORMATION

Bank Name: _____ **Account Number:** _____

Address:

Phone: _____ **Contact Name:** _____

III. CREDIT REFERENCES (List 3 names with address, account number, phone, and fax):

[Go to www.hychem.com](http://www.hychem.com) | [Go to Page 2](#) | [Go to Page 3](#)

**NOTE: PLEASE RETURN THESE FORMS ALONG WITH ANY APPROPRIATE DOCUMENTATION TO:
HYCHEM, INC.**

10014 N. DALE MABRY HWY, SUITE 213

TAMPA, FL 33618

PHONE: 813-963-6214, TOLL-FREE 1-800-327-2998

FAX: 813-960-0175

TERMS OF CREDIT, page 2 of 3. Print this page, then [Click for Page 3.](#)

The customer hereby makes this application for credit to Hychem, Inc. (creditor).

- Should credit availability be granted by creditor, all decisions with respect to the extension or continuation of credit shall be at the sole discretion of creditor.
- The customer agrees to pay for all purchases according to the terms established by the creditor in response to this credit application. No terms and conditions of any invoice or purchase order which differ from the terms so established by the creditor will govern the relationship between the parties. **Hychem's terms are NET 30.**
- The customer agrees that all amounts payable on or before the due date as shown on each invoice will be paid, and if not paid on or before said date, are then delinquent. It is understood that the creditor may impose and charge a finance charge or delinquency charge at the highest rate allowed by law on any amount which becomes past due and delinquent.
- The customer agrees to be responsible for all collection costs and attorney's fees in the event Hychem, Inc. is forced to place the account for collection with an outside agency.
- The customer represents that, as of the date of this application, it is solvent, able to pay its debt as they come due and has not filed, nor is it the subject of, any petition in bankruptcy or for reorganization under any federal or state bankruptcy law. Should the foregoing representation become false at any time during the course of a business relationship between the customer and creditor or while the customer owes any amounts to creditor, customer agrees to immediately notify creditor of all facts surrounding any such occurrence.
- Buyer must agree to Hychem's published Material Return Policy.
- Please complete attached tax certification sheet.

NOTE: Hychem can accept your prepared credit references, however, any item not listed on your form must be completed on ours.

Our application must be signed prior to any product being shipped to indicate acceptance of the terms set forth above.

ALL INFORMATION CONTAINED HEREIN WILL BE HELD IN STRICT CONFIDENCE

Company Officer, Title

Date

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**BLANKET CERTIFICATE OF EXEMPTION, page 3 of 3. Print this page.
SALES AND/OR USE TAX**

THE UNDERSIGNED HEREBY CERTIFIES THAT THE ARTICLES OF TANGIBLE PROPERTY, PURCHASED FROM HYCHEM, INC., ARE EXEMPT FROM STATE AND LOCAL SALES AND/OR USE TAX AND FOR ALL APPLICABLE SHIP-TO ADDRESSES SINCE THEY ARE:

_____ MATERIAL, MERCHANDISE OR GOODS PURCHASED BY THE UNDERSIGNED FOR THE PURPOSE OF **RESALE** IN THE FORM OF TANGIBLE PERSONAL PROPERTY.

STATE SALES TAX CERTIFICATE NUMBER _____

_____ TO BE INCORPORATED AS AN INGREDIENT OR COMPONENT PART OF OTHER TANGIBLE PERSONAL PROPERTY TO BE FABRICATED, COMPOUNDED OR MANUFACTURED FOR SALE.

_____ TO BE CONSUMED IN THE PROCESS OF FABRICATION, COMPOUNDING OR MANUFACTURING TANGIBLE PERSONAL PROPERTY FOR SALE (FOR STATES WHERE APPLICABLE ONLY).

_____ TO BE USED AS AN END PRODUCT IN A MUNICIPALITY, WHEREAS, A COPY OF YOUR TAX EXEMPTION CERTIFICATE IS REQUIRED FOR OUR FILES.

_____ IF YOU ARE NOT SALES TAX EXEMPT PLEASE LIST COUNTY, CITY NAME AND SALES TAX RATE OF LOCATION MATERIAL IS BEING DELIVERED

RATE _____ COUNTY _____

CITY _____

THIS CERTIFICATE SHALL CONTINUE IN FORCE UNTIL REVOKED AND SHALL BE CONSIDERED A PART OF EACH ORDER GIVEN TO THE ABOVE NAMED VENDOR UNLESS THE ORDER SPECIFIES OTHERWISE. (IN SUCH CASE, PLEASE SUPPLY APPROPRIATE EXEMPTION STATUS).

FIRM NAME: _____

ADDRESS: _____

BY: _____ TITLE: _____

DATE: _____

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