

# NOTT COMPANY

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Remit-to Address: P.O Box 1450, N.W. 7779, Minneapolis, Minnesota 55485-7779  
Power Transmission - Hose & Belting\* Fluid Power \* Rubber Fabrication \* Adhesives

## APPLICATION FOR CREDIT

LEGAL BILLING NAME & ADDRESS	SHIPPING ADDRESS	Date Established
Name _____	Name _____	_____
Street _____	Street _____	Ship-to County _____
PO Box _____	City _____ ST _____	ZIP _____
City _____ ST _____	Zip _____ Telephone # ( ) _____	Fax # ( ) _____
_____ Subsidiary of	<b>PARENT NAME AND ADDRESS:</b>	_____ Corporation _____ LLC
_____ Division of	_____	_____ Partnership _____ LLP
_____ Branch of	_____	_____ Proprietorship _____ Other

### Name of owners, and/or partners:

Name _____	Title _____	Soc. Sec No. (last 4 digits) _____	Home Phone ( ) _____
Home Address _____			
Name _____	Title _____	Soc. Sec No. (last 4 digits) _____	Home Phone ( ) _____
Home Address _____			

### COMMERCIAL REFERENCES (Give Exact Street and City Address)

1. Name \_\_\_\_\_ Street or PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone ( ) \_\_\_\_\_
2. Name \_\_\_\_\_ Street or PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone ( ) \_\_\_\_\_
3. Name \_\_\_\_\_ Street or PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

### BANK REFERENCE (Give Exact Street and City Address)

Name _____	Street or PO Box _____
City _____	State _____ Zip Code _____
Telephone ( ) _____	Officer to Contact _____

Type of Product or service you wish to purchase \_\_\_\_\_  
Initial Order \$ \_\_\_\_\_

Desire monthly Statement? \_\_\_\_\_ Accept backorders? \_\_\_\_\_ Require purchase order number? \_\_\_\_\_  
Do you accept invoices via fax or e-mail? \_\_\_\_\_ If so, please indicate your preference by providing a fax number  
or e-mail address \_\_\_\_\_ Tax exempt? \_\_\_\_\_ **If yes, attach certificate**  
A/P contact \_\_\_\_\_ Direct line \_\_\_\_\_ Email \_\_\_\_\_  
Buyer name & direct line \_\_\_\_\_ Nott sales contact \_\_\_\_\_  
Preferred shipping method & collect number \_\_\_\_\_  
Company website \_\_\_\_\_

Applicant certifies that all the information on this application is correct and agree to properly pay your invoices according to your terms in consideration of an open line credit account. As part of this application for credit, we grant permission to contact appropriate credit reporting agencies, and any or all of the Trade and Bank References listed above, together with any other references which may be provided by these Trade and Bank References

Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_  
09/27/11