

Credit Application

PO Box 431
San Bernardino, CA 92402



Date	
Customer	
Sales Rep.	

www.myamtex.com 800-650-3360 sales@myamtex.com

Type of Business (check one) Corporation Proprietorship Partnership

Name of AMTEX sales person (if you are working with one): _____

How long have you been in business? _____

INSTRUCTIONS (Please carefully read the instructions below).
 Please complete section 1, 2, 3, & 4 (print or type all the information)
 Please complete the mandatory information in Section 1 about legal name of the business, license number.
 Please attach a copy of the business license to enable us to process the order
 Please fill in all the required information in section 1 through 4, to process the credit application promptly

IF YOU HAVE ANY OTHER HOTELS YOU OWN, PLEASE LIST THEM HERE: (THIS MAY EXPEDITE THE PROCESSING OF THIS APPLICATION)

- PROPERTY NAME & ADDRESS: _____
DATE OF OWNERSHIP _____ Existing Account w/ us?(Y / N) (if yes list account #) _____
- PROPERTY NAME & ADDRESS: _____
DATE OF OWNERSHIP _____ Existing Account w/ us?(Y / N) (if yes list account #) _____
- PROPERTY NAME & ADDRESS: _____
DATE OF OWNERSHIP _____ Existing Account w/ us?(Y / N) (if yes list account #) _____

SECTION 1

Name of Business	DBA (if different)	Phone Number	Fax Number:
Email		Federal ID #	If Incorporated Where
Prior Company Name (if changed within 1 year)			
Local Address: Street		City	State: Zip:
Principal Address: Street		City	State: Zip:
Legal Name of the Business		License No.	Place of issue (City)
Corporate Officers: President		V.P	
If Partnership, Principal Partner (1)		Partner (2)	

SECTION 2 BANK INFORMATION

Bank Name	Branch Location
Phone #	Account #
Fax #	Contact

SECTION 3 TRADE REFERENCE (List Three)

i. Company Name	DBA (if different)	Phone Number	Fax Number:
Address: Street		City	State: Zip:
Contact		Account #	
ii. Company Name	DBA (if different)	Phone Number	Fax Number:
Address: Street		City	State: Zip:
Contact		Account #	
iii. Company Name	DBA (if different)	Phone Number	Fax Number:
Address: Street		City	State: Zip:
Contact		Account #	

The information on this application is submitted for the purpose of requesting extension of credit for commercial business use only. Applicant's signature attests financial responsibility, ability and willingness to pay for materials supplied according to our credit terms which are stated in the invoice. I am an authorized representative of the above named company, to act in behalf of said company or organization. I hereby authorize any and all credit reporting agencies to disclose all information concerning past credit history prior to the date of the contract. I also authorize any bank or commercial business with whom the applicant is doing or has any type of business to disclose any and all necessary information to American Tex-Chem Corporation, Inc. (hereinafter referred as AMTEX) which will assist AMTEX in its credit investigation. I authorize AMTEX to investigate the applicant's credit status from time to time as AMTEX deems necessary. I undertake to notify AMTEX, regarding any changes in the legal status of the applicant company, by certified mail. The original applicant will remain liable until such time as AMTEX has received notice of the change in legal status and been given a reasonable period of time to such notice. Further, should this amount be placed for collection the applicant agrees to pay all costs of collection including, but not limited to attorney fees of 25% or more.

Signature: _____ Print Name: _____
 Title: _____ Date: _____

SECTION 4 (To be completed by Sole Proprietor, Partner, or Guarantor, as applicable - see instructions above)

Name of Business	DBA (if different)	Phone Number	Fax Number:
Home Address: Street:		City:	State: Zip:
Previous Address: Street:		City:	State: Zip:
Email:			
Social Security #:	Home Phone #:		

The attached "TERMS OF EXTENSION OF CREDIT AND OF GUARANTY AGREEMENT" INCORPORATED HEREIN BY THIS REFERENCE. THE UNDERSIGNED HEREBY ACKNOWLEDGES RECEIPT OF AND AGREEMENT TO THE "TERMS OF EXTENSION OF CREDIT AND OF THE GUARANTY AGREEMENT"
 In consideration of the Extension of Credit to the Owner/Property by American Tex-Chem Corporation, Inc., I hereby certify the truthfulness of the Information provided above, which shall be considered material represented and inducements to extend credit. I further certify that I have the authority to bind the owner property to the Terms contained herein and that by signature below. I do so bind the owner/property and myself as personal guarantee, in accordance with the Terms of Credit application and Guaranty Agreement. I full and unconditionally guarantee to American Tex-Chem Corporation, Inc the prompt payment of bills and all other charges which may become due in accordance with the terms and conditions of Extension of Credit by American Tex-Chem Corporation, Inc whenever the company shall fail to pay same. I agree to indemnify American Tex-Chem Corporation, Inc. for all expenses incurred in connection with collection of amount payable, including court costs and attorneys' fees. I understand that this guaranty shall continue and be irrevocable until all the amount under the terms of Credit has been paid, or until I receive written release from this guaranty from American Tex-Chem Corporation, Inc. See additional terms & conditions at www.myamtex.com

Witness My Hand & Seal, this _____ day of _____ 200__

Signature: _____ personally and as _____ of the owner/ property.
 (Guarantor) (Title)

Print Name: _____ Social Security number of Signer _____

CREDIT CARD AUTOMATIC PLAN

Name As It Appears On Card	<input type="checkbox"/> American Express	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover
Account #	Expiration Date	Authorization #		

PERMISSION TO CHARGE MY CREDIT CARD

I (we) hereby authorize American Tex-Chem Corporation, Inc. to charge to my (our) credit card indicated below for current and future charges pertaining to the merchandise supplied. This authorization is to remain in full force and effective until American Tex-Chem Corporation, Inc. has received written notification from me (or either of us) in such time and manner as to reasonable act on it.

Signature _____	Date _____	Signature _____	Date _____
Print Name: _____		Print Name: _____	

For Office Use Only

ACCOUNT # _____ ACCOUNT OPENED DATE _____ APPROVED BY _____