



APPLICATION FOR A CREDIT ACCOUNT

Company Name: _____

“Bill-To” Address: _____

“Ship-To” Address: _____

Office Phone: _____ **Fax #** _____

Type of Business: Proprietorship _____ Corporation _____ Other _____

Years in Business: _____ **Number of Employees:** _____ **Fed ID #** _____

OWNERS / PRINCIPALS:

Name: _____ **Title:** _____

Name: _____ **Title:** _____

CREDIT REFERENCES:

Company Name: _____ **Phone # -** _____

Company Name: _____ **Phone # -** _____

Company Name: _____ **Phone # -** _____

BANK REFERENCE:

Bank’s Name: _____ **Phone # -** _____

Officer / Contact: _____ **Phone # -** _____

On behalf of the company named above, I understand and agree that the information furnished on this credit application is for the purpose of inducing IPS to extend credit to this company listed above. I represent and warrant to the best of my knowledge and belief that all information herein and all other such information obtained, will be true, accurate and complete on the date in which the information is provided and certified. Furthermore, I understand and agree that the terms of payment of all invoices are Net 30 days and I also agree to pay interest of 18% per annum (one and one-half percent per month) on all past due balances as well as reasonable legal fees should it become necessary for the collection of my past due account balances.

Company Name: _____

Authorized Agent: _____ **Title & Date:** _____

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