

Credit Application

PTM Corporation

Sales Office

6560 Bethuy Road

Fair Haven, MI 48023

Email: pzarkowski@ptmcorporation.com

Website: www.ptmcorporation.com

Phone: 586/725-2211

Fax: 586/725-6753

Remit to: PTM Corporation

6560 Bethuy Road

Fair Haven MI 48023

Company Information

Company:

Billing Address:

City, State, Zip Code:

Phone No:

Fax No:

Type of Business (Corp, Partnership):

Years in Business:

Duns No:

Federal ID No:

PO's required?:

President/Owner:

Controller:

Accounts Payable:

Purchasing:

Shipping Address:

City, State, Zip Code:

Phone No:

Fax No:

Trade References

Company/Contact:

Address:

Fax No:

Phone No:

Contact:

Company/Contact:

Address:

Fax No:

Phone No:

Contact:

Company/Contact:

Address:

Fax No:

Phone No:

Contact:

Company/Contact:

Address:

Fax No:

Phone No:

Contact:

Bank Information

Bank Name:

Address:

Fax No:

Phone No:

Contact:

I certify that the above information is true. This information is to be used only for opening a PTM Corporation account. I hereby agree to pay reasonable collection costs, attorney fees, court costs if this creditor finds it necessary to use such means to collect a past due account from me or my company. This is in addition to a 1.5% per month interest charge for a Per Annum of 18% on over due amounts.

Sign:

Title:

Print Name:

Date:

Internal Use Only

Expected Annual Sales: \$

Credit Approvals

Quoted Tooling Charges: \$

Controller:

Credit Limit Granted: \$

*CFO:

Credit Terms Allowed: \$

*Vice President:

*CFO approval needed if sales exceed \$250K or Tooling over 75K.

*VP approval needed if sales exceed one million or tooling cost over 125K