



PACIFIC PIPE CO.

OAHU
1255 Kuala Street
Pearl City, HI 96782
Ph: 808-455-8700

MAUI
147 Kalepa Place #201
Kahului, HI 96732
Ph: 808-877-5800

For Office Use Only:

Date Received: _____

_____ Approved

_____ Denied

Notes:

CREDIT APPLICATION

*Required Information

Application will not be processed unless complete

General Information

*Company Name _____
 *Street Address _____

 *Billing Address _____

 *Phone _____
 Fax _____
 *Type of business Corporation Partnership Other _____

Federal ID # _____
 GE # _____
 Duns # _____
 Nature of Business _____

 Years in Business _____
 Amount Requested _____

Accounts Payable Contact

*Name _____
 *Email _____

*Phone _____
 *Fax _____

Partners or Corporate Officers

Name	Title	SSN#	Telephone

Bank Information

Bank Name _____
 Bank Address _____
 Contact Person _____

Account# _____
 Phone _____
 Fax _____

HAWAII References (Please provide a fax number for ALL references.)

1) Name _____ Address _____ City/State/Zip _____ Phone _____ Fax _____ Contact _____	2) Name _____ Address _____ City/State/Zip _____ Phone _____ Fax _____ Contact _____
3) Name _____ Address _____ City/State/Zip _____ Phone _____ Fax _____ Contact _____	4) Name _____ Address _____ City/State/Zip _____ Phone _____ Fax _____ Contact _____

I authorize Pacific Pipe Company to verify any trade and bank references. We understand that ANY information obtained by Pacific Pipe Company will be held in confidence. The requested information will be used solely in assisting and securing credit terms for the applicant.

Credit Terms and Agreement

Applicant agrees that in consideration of the extension of credit to Applicant by Pacific Pipe Company, Inc., Applicant shall be subject to the following terms:

Payments are due **NET 30 DAYS FROM INVOICE DATE** for established open credit accounts in good standing.

All invoices which are not paid within 30 days shall be assessed a 1.5% monthly (18% annual) service charge.

Pacific Pipe Company, Inc. reserves the right to withdraw credit terms previously granted.

Pacific Pipe Company, Inc. may withhold shipment of product due to non-payment of invoices.

I hereby certify that I am authorized to represent the entity listed above. I certify the information on this form is true and complete and is represented to Pacific Pipe Company in order to establish open account terms. We promise to pay for all purchases in accordance with Pacific Pipe Company's Terms. Account balances not paid in accordance with this agreement are subject to the maximum prevailing legal interest rate. In the event it becomes necessary for Pacific Pipe Company to incur collection costs or institute suit to collect any amount due, we agree to pay such additional costs, charges and expenses including attorney fees, and hereby consent to the jurisdiction of and venue in the courts of the State of Hawaii.

*Signature of Authorized Officer

*Print Name / Title

*Date