



Visa and Mastercard Available

# CREDIT APPLICATION

SFS Group USA Inc., Spring Street and Van Reed Road  
PO Box 6326, Wyomissing, PA 19610

Phone: 610-376-5751

Fax: 610-375-3917

world leader in innovation, service and quality

Company Name			Date
Mailing Address		City	State Zip Code
Street Address		City	State Zip Code
Telephone	Fax No.	Years Established	Tax Exempt Number (submit form)
Type of Business Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>			
State of Incorporation			Date

Principal Officers	Address	Telephone
Owner/President		
Chief Financial Officer		
Accounts Payable		

PLEASE NOTE-ONLY INCLUDE FAX NUMBERS FOR BANK AND TRADE REFERENCES

Bank Reference	Account Numbers	Address	FAX
Name			
Account Officer/Contact			

Trade References	Address	Fax
1		
2		
3		

\*\*\*Terms Net 30 Days

Approximate Monthly Credit Requested \$ \_\_\_\_\_

I understand that SFS Group USA Inc. terms are net 30 days with the exception of Nvelope product that has its own term of 50% down and the balance due thirty (30) days after shipment. I understand the information furnished on this application is for the purpose of obtaining credit, and that I am authorized in my capacity to bind my firm accordingly, that all accounts or monies shall be due and payable to SFS Group USA Inc. An additional two percent (2%) service charge or the maximum amount permitted by applicable state law, whichever is lower may be charged to all accounts not paid within thirty (30) days from the date of invoice. In the event of nonpayment of debt, I agree to pay all costs and expenses including attorney's fees and court costs, incurred by SFS Group USA Inc.

Owner/Corporate Officer Signature Required	Name and Title	Date
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This Credit Application must be filled in completely before credit will be extended. Thank you for your interest in SFS Group USA Inc.

### FOR OFFICE USE ONLY

Date Opened	Salesman	Customer Number
Service Center		Territory



SFS Group USA, Inc.  
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# BLANKET RESALE CERTIFICATE

The undersigned vendee hereby certifies that it is a regularly licensed retailer under the law(s) of the State(s) indicated on the attached sheet, holding the sales tax license or permit number(s) there enumerated and that all the tangible personal property purchased from:

## SFS Group USA, Inc.

Is exempt from sales and use tax for the following reason: (Check applicable box)

- Resale, in the regular course of business, in the form of tangible personal property.
- Incorporating the same, as a material, ingredient or component part, into tangible personal property produced for sale
- Shipping cartons, containers and other packaging materials are for resale. (New York State only)
- Other authorized exemption - describe:

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This certificate shall be considered a part of each order given by vendee from and after the effective date hereof, unless such order shall otherwise specify.

This certificate shall continue in full force and effect unless and until revoked in writing by the vendee.

The vendee understands and agrees that if it uses any property purchased tax-free under this certificate in any manner which would not exempt the sale from tax, it becomes the user or consumer of such property, and as such assumes liability for and undertakes to pay the tax and interest and penalty thereon, if any.

Dates as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Name of Company (Print or Type)

\_\_\_\_\_  
Signature of Purchaser or Agent

\_\_\_\_\_  
Title of Authorized Agent

Address \_\_\_\_\_

\_\_\_\_\_



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## IMPORTANT

Please insert your Sales Tax License of Registration Number in the following tax jurisdictions in which you are registered.

### LICENSE NUMBER

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Alaska	_____	Montana	_____
Alabama	_____	Nebraska	_____
Arizona	_____	Nevada	_____
Arkansas	_____	New Hampshire	_____
California	_____	New Jersey	_____
Colorado	_____	New Mexico	_____
Connecticut	_____	New York	_____
Delaware	_____	North Carolina	_____
District of Columbia	_____	North Dakota	_____
Florida	_____	Ohio	_____
Georgia	_____	Oklahoma	_____
Hawaii	_____	Oregon	_____
Idaho	_____	Pennsylvania	_____
Illinois	_____	Rhode Island	_____
Indiana	_____	South Carolina	_____
Iowa	_____	South Dakota	_____
Kansas	_____	Tennessee	_____
Kentucky	_____	Texas	_____
Louisiana	_____	Utah	_____
Maine	_____	Vermont	_____
Maryland	_____	Virginia	_____
Massachusetts	_____	Washington	_____
Michigan	_____	West Virginia	_____
Minnesota	_____	Wisconsin	_____
Mississippi	_____	Wyoming	_____
Missouri	_____		