



7325 NE Imbrie Dr, Ste 398  
Hillsboro, OR 97124  
Ph 877-988-5464 x 105, Fax: 503-567-9011

## **GUIDLEINES FOR APPLYING FOR US DOMESTIC COMMERCIAL CREDIT**

**\* Please review the following guidelines BEFORE applying for credit \***

If you have ANY questions or concerns, please contact Legacy Chiller Systems credit for assistance at 877-988-5464 x 105 or email: [accounting@legacychillers.com](mailto:accounting@legacychillers.com).

1. The credit review period begins when a fully completed “Commercial Application for Credit” has been received AND a minimum of THREE trade references have returned. NOTE: Legacy Chiller Systems will accept pre-printed credit data provided that page #3 of the application is signed by a company representative with the adequate authority.
2. All orders connected to clients that have not established credit terms with Legacy Chiller Systems are entered initially with credit terms of 50% pre-payment (due within SEVEN BUSINESS DAYS of order being posted) and balance prior to ship.
3. Customers who have been previously approved for credit terms who have made no purchases with Legacy Chillers for **TWELVE MONTHS**, will be subject to a credit review.
4. The following items can help speed the credit review process:
  - A. Please provide a minimum of **FOUR** trade references with your application. Although we only require three references, having a fourth as a backup in the event that one does not respond can save a lot of time.
  - B. Only provide trade references that your firm has recent transactions of amounts higher than the amount of credit your firm is requesting from Legacy Chiller Systems. For example, if your firm has issued a PO to Legacy Chiller Systems for \$50,000, it is best to submit trade references for vendors that your firm has recently conducted \$50,000 in business (or more) on net credit terms.
  - C. Please provide complete contact information for your trade references. This information must include all information requested on the Commercial Application for Credit document. Current contact persons, email and fax numbers are essential in getting a prompt credit response from Legacy Chiller Systems credit department.

Once the above credit information has been received, we can generally get a responses from credit within 3-5 business days.

**\*\* IMPORTANT NOTE:** Legacy Chiller Systems extends credit terms to shipments within the lower 48 United States only. All International shipments require 50% prepayment, balance prior to shipment.



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## COMMERCIAL APPLICATION FOR CREDIT

PLEASE SEND COMPLETED APPLICATION TO  
FAX: 503-567-9011 or EMAIL: ACCOUNTING@LEGACYCHILLERS.COM

BILLING NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY / STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

**PRINCIPAL #1 NAME, TITLE/FUNCTION (please print or type)**

\_\_\_\_\_  
SOCIAL SECURITY # OR TAX ID#: \_\_\_\_\_

**PRINCIPAL #2 NAME, TITLE/FUNCTION (please print or type)**

\_\_\_\_\_  
SOCIAL SECURITY # OR TAX ID#: \_\_\_\_\_

**PERSON OR PERSONS TO BE CONTACTED WITH QUESTIONS PERTAINING TO THIS APPLICATION FOR COMMERCIAL CREDIT:**

PRIMARY contact :-> Name: \_\_\_\_\_, Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

BACKUP contact :-> Name: \_\_\_\_\_, Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

**TRADE REFERENCES: ALL INFORMATION MUST BE COMPLETED**

1. NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY / STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE#: \_\_\_\_\_ FAX#: \_\_\_\_\_  
DATE OF FIRST SALE: \_\_\_\_/\_\_\_\_/\_\_\_\_ EMAIL: \_\_\_\_\_

2. NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY / STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE#: \_\_\_\_\_ FAX#: \_\_\_\_\_  
DATE OF FIRST SALE: \_\_\_\_/\_\_\_\_/\_\_\_\_ EMAIL: \_\_\_\_\_

3. NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY / STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE#: \_\_\_\_\_ FAX#: \_\_\_\_\_  
DATE OF FIRST SALE: \_\_\_\_/\_\_\_\_/\_\_\_\_ EMAIL: \_\_\_\_\_

4. NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY / STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE#: \_\_\_\_\_ FAX#: \_\_\_\_\_  
DATE OF FIRST SALE: \_\_\_\_/\_\_\_\_/\_\_\_\_ EMAIL: \_\_\_\_\_

**BANK REFERENCES: IMPORTANT! ACCOUNT NUMBER MUST BE FURNISHED**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY / STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE#: \_\_\_\_\_ ACCOUNT# \_\_\_\_\_  
NAME OF PERSON TO CONTACT: \_\_\_\_\_

**THIS BUSINESS IS A (please check)**

\_\_\_\_\_ CORPORATION \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ PROPRIETORSHIP  
\_\_\_\_\_ CONTRACTOR \_\_\_\_\_ INDUSTRIAL \_\_\_\_\_ OTHER

**OTHER COMPANY INFORMATION:**

BUSINESS OPERATED UNDER PRESENT OWNERSHIP SINCE: 19/20 \_\_\_\_\_  
IS THIS BUSINESS PUBLICLY TRADED: YES: \_\_\_\_\_ NO: \_\_\_\_\_ / SIC Code#: \_\_\_\_\_  
PRODUCTS/SERVICES RENDERED: \_\_\_\_\_  
HOW MANY PEOPLE DO YOU EMPLOY ON PAYROLL?: \_\_\_\_\_  
PERSON TO CONTACT REGARDING: PURCHASES: \_\_\_\_\_  
PERSON TO CONTACT REGARDING: PAYMENTS: \_\_\_\_\_  
PURCHASE ORDERS ARE (check one): \_\_\_\_\_ REQUIRED \_\_\_\_\_ NOT REQUIRED

**SALES TAX STATUS :-> NOT EXEMPT \_\_\_\_\_ \*\* EXEMPT# \_\_\_\_\_**

**\*\* IF TAX EXEMPT PLEASE ATTACH A SIGNED TAX EXEMPTION CERTIFICATE**

**THE FOLLOWING TERMS OF SALE ARE AGREED TO AND ACCEPTED:**

1. Unless specifically stated on our invoice, all purchases carry Net 30 Terms.
2. To any invoice not paid in accordance with its terms, there shall be added thereto, a late charge at the rate of 2% per month or the maximum rate permitted by law if less than 2% per month on the unpaid balance for each month, or fraction of a month, that such balance remains unpaid.
3. In the event of default in payment, and your account is placed with a collection agency or attorney, you agree to pay all cost of collection. Further, all cost incurred in collection together with attorney's fees up to the maximum amount permitted shall be borrower's responsibility.
4. IMPORTANT: Net terms, warranty and technical support can be suspended or revoked should an account become past due.

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

## PERSONAL GUARANTEE

The undersigned, jointly severally and personally, in consideration of your extending credit to the applicant, do hereby agree to pay for all goods sold to applicant, in the event of default by applicant, you shall be entitled to look to us for payment without prior demand or notice and without first having attempted to collect from applicant. In the event you engage the services of an attorney to collect any sum of money due hereunder, or to enforce or defend your rights hereunder, you shall be entitled to collect reasonable attorney's fees from the undersigned. The liability of the undersigned shall not be affected by any extensions or indulgences granted applicant or by releasing or surrendering any security given by the applicant. The undersigned agree to give you written notice by Certified Mail in the event of any changes in the ownership of applicant's business or the form of applicant's business organization.

NAME: \_\_\_\_\_ Title: \_\_\_\_\_ DATE: \_\_\_\_\_  
PRINT OR TYPE

SIGNATURE: \_\_\_\_\_