New Customer
Credit Application Form

345 E Tulare Ave
Visalia, CA 93277

Please return completed Credit Application Form to accountsreceivablewest@vytalusa.com

Registered Company Name:			
Trade Style Name (if Different from Above) or Parent Company Name:			
Billing Address: **Street Address** / **City/Town** / **State** / **Zip Code**			
Business Phone:	**Website Address:**		
Nature of Business:		**Date of Incorporation:**	**Years in Business Under Current Ownership:**
Name of Vytal Filtration Point of Contact:			
Purchase Order Required:		**Invoice Submission Tool:** (Email/Portal/Etc.)	
Credit Limit Requested ($):			
Accounts Payable Contact:		**Payment Frequency:**	
Accounts Payable Phone #:		**Method of Payment:**	
Accounts Payable Email:		**Controller's Name:**	
Bank Name:		**Controller's Email:**	
Branch #:		**Fed Tax ID #:**	
Account #:		**State of Incorporation:**	
Bank Contact:		**Tax Exemption Certificate*** Yes ◯ No ◯	

Credit/Trade References: ***Must provide copy with application.***

Company Name	**Phone Number**	**Contact**
1)		
2)		
3)		

It is understood and agreed upon that all monies are due to Vytal Filtration Technologies W LLC within 30 days of the date of the invoice unless agreed to in writing by an authorized signing officer of Vytal Filtration Technologies W LLC.

Authorized Signature:	Print Name:	Title:	Date

New Customer Account Agreement

345 E Tulare Ave
Visalia, CA 93277

Account Agreement:

It is understood and agreed that any credit granted by Vytal Filtration Technologies W LLC, hereinafter referred to as Vytal, shall be on the following terms and conditions.

1. Vytal shall determine in its sole discretion the amount and whether to grant credit to the customer. Vytal has no obligation to grant such credit and any granting of credit is without commitment to provide any future credit. The customer shall be responsible for all credit received from Vytal whether or not such credit exceeds authorized credit limits.

2. All monies are due and payable within 30 days of the date of the invoice unless agreed to in writing by an authorized signing officer of Vytal.

3. Agents or representatives of Vytal are not authorized to change or adjust credit terms without the written authorization of the Corporate Controller.

4. If the customer does not make payment within 30 days of invoice date a finance charge of 2% per month may be charged to the customer. Calculation of interest charges would begin on the 31st day following the date of invoice.

5. Any payment made by a customer in respect to a credit transaction shall be applied first to pay the accumulated finance charges and thereafter to reduce the principal amount of the outstanding debt.

6. The customer authorizes Vytal to conduct any credit investigations it deems appropriate and authorizes the release, receipt or exchange of financial information to Vytal from any financial institution, credit reporting agency or any person with whom the Applicant has or proposes to have financial relations.

7. The customer affirms that the information stated on the credit application is true and accurate.

8. The customer shall provide remittance documentation for all payments made to Vytal and will provide remittance documents to accountsreceivablewest@vytalusa.com within 3 business days of the payment.

The customer acknowledges that they have read and understood the terms of credit herein and agrees to be bound by them. I am the applicant named herein or an authorized representative of the company named herein.			
Authorized Signature:	Print Name:	Title:	Date
Authorized Signature:	Print Name:	Title:	Date

Internal Use:	
Sales Rep:	Territory: