



**PIP 324**  
 3855 E. 96th Street, Suite P  
 Indianapolis, IN 46240  
 Phone (317) 569-1855  
 Fax (317) 569-1809

**APPLICATION FOR CREDIT AND CONTRACT**

FIRM NAME \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 TYPES OF BUSINESS OR ACTIVITY \_\_\_\_\_ YEAR EST. \_\_\_\_\_ AMT. OF CREDIT REQUESTED \$ \_\_\_\_\_

**BILLING INFORMATION**

NAME \_\_\_\_\_ CONTACT NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

PERSONS AUTHORIZED TO INCUR CHARGES ON BEHALF OR YOUR COMPANY, FIRM OR ORGANIZATION:

\_\_\_\_\_  
 \_\_\_\_\_

INDIVIDUAL OWNER: \_\_\_\_\_

PARTNERSHIP: \_\_\_\_\_  
 NAME OF MANAGING PARTNER(S) \_\_\_\_\_

CORPORATION: PRESIDENT: \_\_\_\_\_ V. PRESIDENT: \_\_\_\_\_  
 SECRETARY: \_\_\_\_\_ TREASURER: \_\_\_\_\_

**CREDIT CONTRACT**

It is hereby agreed by (Firm Name) \_\_\_\_\_ and PIP Printing that the privilege of a charge account with PIP Printing shall be subject to the following conditions:

1. The aforementioned person, company, organization, or corporation, shall pay all invoices upon receipt to PIP Printing within thirty (30) days of invoice date.
2. All invoices due and payable shall have a finance charge imposed on goods and services from the date each transaction is posted at a periodic rate of 1.5% per month. . . (AN ANNUAL PERCENTAGE RATE OF 18% . . . except that, if the new balance shown on the statement on which goods and services first appear is paid in full by the Due Date, no finance charges for those goods and services will be imposed.
3. If debtor defaults in any obligation to PIP Printing, dies becomes incompetent or suffers an adverse change in his financial condition which PIP Printing deems material, the full amount owing by debtor shall, at PIP Printing's election and without notice on demand, become immediately due and payable, (together with reasonable attorney fees and collection costs and without relief form valuation or appraisalment laws.
4. This agreement, except to the degree Federal Law is applicable, shall be governed by the laws of the State of Indiana. The invalidity of any term or condition does not affect the remainder. PIP Printing may amend this agreement from time to time by mailing a copy of the amendment to debtor at the address shown on this application at least 15 days prior to the amendment effective date.
5. PIP Printing reserves the right to limit a credit line and also reserves the right to place an account on C.O.D. without notice.
6. PIP Printing is entitled to retain the original artwork from the aforementioned person, company, organization or corporation until the debt is paid in full.

This agreement made and entered into this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

In consideration of credit being extended to the above business by PIP Printing, I/we the undersigned, agree to be jointly, several and individually responsible for the payment of any and all goods and services furnished by PIP Printing, including cost of collection, to our business or to us individually. This is a continuing agreement and will remain in full force and effect until the same is revoked either by the undersigned or PIP Printing, by giving written notice of said revocation.

X \_\_\_\_\_ RESPONSIBLE PERSON \_\_\_\_\_ TITLE \_\_\_\_\_

**BANK REFERENCE:**

NAME OF BANK: \_\_\_\_\_ PHONE \_\_\_\_\_ ACCT. # \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

**LOCAL BUSINESS REFERENCES::**

FIRM NAME \_\_\_\_\_ ACCT. # \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

FIRM NAME \_\_\_\_\_ ACCT. # \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

FIRM NAME \_\_\_\_\_ ACCT. # \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

Amount of Credit Approved \$ \_\_\_\_\_ By: \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_