

Seals Unlimited Inc. Credit Application

Please send completed application and any questions to accounting@sealsunlimitedinc.com

*Terms are net 30 days from date of invoice. Invoices unpaid at 45 Days may result in credit hold. ACH payments available upon request.

**Net minimum order \$15.00.

***Resellers/repair facilities are eligible for discounts with valid copy of State Resale Certificate or State Sales Tax Exempt Certificate.

Tell us about your business

Company Name		<input type="text"/>
Address Line 1		<input type="text"/>
Address Line 2	City	<input type="text"/>
State	Postal/Zip Code	<input type="text"/>
Accounts Payable Contact Email	Purchasing Contact Email	<input type="text"/>
Phone	Fax	<input type="text"/>
Email (this is where we will send invoices)		<input type="text"/>
UPS Account # (if applicable)		<input type="text"/>

If you have a separate shipping address enter it below

Company Name		<input type="text"/>
Address Line 1		<input type="text"/>
Address Line 2	City	<input type="text"/>
State	Postal/Zip Code	<input type="text"/>

Please provide 3 credit references

Company Name	Email or Fax
<input type="text"/>	<input type="text"/>
Account No. or person to contact	
<input type="text"/>	

Company Name	Email or Fax
<input type="text"/>	<input type="text"/>
Account No. or person to contact	
<input type="text"/>	

Company Name	Email or Fax
<input type="text"/>	<input type="text"/>
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<input type="text"/>	