



Sold Only Through
Uniform Stores & Authorized Resellers

APPLICATION FOR CREDIT

Please fill in the **entire** application. We look forward to working with you on an "open account" basis. Thank you.

Date _____

Name of Firm: _____ Year Est.: _____ Phone: () _____

Other DBA's & Company names vendors and bank may know you as: _____

Accounts Payable Contact: _____ - AP/Email _____
- Fax () _____

Bill To: _____ Ship To: _____

Indicate: ___ - Corporation ___ - Sole Proprietor ___ - Partnership

IF PARTNERSHIP - Please provide data for all partners:

Owner Name: _____ Owner Name: _____

Drivers Lic #: _____ Drivers Lic #: _____

Soc. Sec. #: _____ Soc. Sec. #: _____

D & B Rating: _____ Number of stores: _____ Do any of your stores have an account with us currently? Y N

OPEN ACCOUNT TRADE REFERENCES: (Please do not list credit cards, stationery store, gas stations)

****Please fill-in all requested information (including fax #) - PLEASE PRINT CLEARLY****

1. Name _____ Phone: () _____ Fax: : () _____
Address _____ City _____ State _____ Zip _____

2. Name _____ Phone: () _____ Fax: : () _____
Address _____ City _____ State _____ Zip _____

3. Name _____ Phone: () _____ Fax: () _____
Address _____ City _____ State _____ Zip _____

4. *YOUR BANK _____ Phone: () _____ Fax: : () _____
ACCOUNT NUMBER _____ *****(MUST HAVE ACCT NUMBER TO PROCESS)** _____
Address _____ City _____ State _____ Zip _____

Credit Limit requested: \$ _____ When approved, Credit Terms are Net 30 Days (Includes open invoices and orders in work)

I agree to pay within these terms, and I understand that if our account is not current, shipments may be sent C.O.D. (with prior notification).

I also authorize the references listed above to release credit information to HERO'S PRIDE and authorize HERO'S PRIDE to contact Experian, D & B or other credit rating services

Printed Name : _____ Title : _____ Signature: _____ Date : _____

PLEASE DO NOT WRITE BELOW THIS LINE - FOR HP CREDIT DEPT USE

___ Quote -or- ___ Order Pending - Amount \$ _____ Initials: _____ Customer #: _____ PLAR08 ___ Credit Limit \$ _____
___ Computer Approved by: _____ Date: _____

HERO'S PRIDE

Finest Quality Emblems, Duty Gear & Uniform Accessories

Sold Only Through Uniform Stores & Authorized Resellers

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Local 818.350.6321 reseller@herospride.com

Mail: P.O. Box 10033, Van Nuys, CA 91410-0033
Ship: 8964 Oso Avenue, Chatsworth, CA 91311

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