

Internal Use Only						
Account #	Credit Limit					
Date Approved	MS#					

Portland Bolt & Manufacturing Credit Application

Please complete the entire application. If a question is not applicable to your company write N/A in the field.

Company Information									
Company Name			,						
Billing Address				City			State	ZIP	
Physical Address				City			State	ZIP	
Phone	Fax#	Email for Invoices	s		Amt. Reque	ested	□State	ement required required	
		Additional Co	mpany Info	ormatio	on				
Type of business		Website				Federa	al ID#		
Years in business Numbe		per of employees	Type of business ☐Sole proprietor ☐Partnership ☐			□Co	Corporation		
		Ownersh	ip Informa	tion					
Owner/Partner/Preside	ent	<u> </u>					Phone		
Partner/Vice Presiden	t						Phone		
Partner/Vice Presiden	t						Phone		
Name			Reference	S			Em ell		
Name		Address					Email		
Name		Address					Email		
Name		Address					Email		
		In lieu of an email, _l	olease provide a	fax numbe	er				
		Bank l	Informatio	1 _					
Bank			Contact						
Phone			Account #						
	Please re	ad and sign pa	age 2, "Tern	ns and	Condition	าร"			

Mailing Address:

PO Box 2866 Portland, OR 97208 (800) 547-6758

Fax: (503) 323-0433 www.portlandbolt.com sales@portlandbolt.com

Physical Address:

3441 NW Guam St Portland, OR 97210



Phone: (800) 547-6758 **Fax:** (503) 323-0433

Email: sales@portlandbolt.com **Web:** www.portlandbolt.com

Portland Bolt & Manufacturing Terms and Conditions

We would like to take this opportunity to thank you for applying for credit with Portland Bolt & Manufacturing, Inc. We are confident that you will be satisfied with our line of products as well as our service.

In acknowledgment of our terms listed below, please have an officer of your company sign and return this letter along with your credit application. **Your application cannot be processed without a signed copy of this form.**

Again, thank you for using Portland Bolt & Manufacturing, Inc. for your fastener requirements.

TERMS

- All invoices are net 30 days from date of invoice
- All past due invoices will be charged a service charge.
- Accounts with invoices over 60 days (from date of invoice) will be changed to C.O.D.
- All returns are subject to prior approval and a restocking charge. A copy of the packing slip must accompany the return.

The undersigned company agrees to pay, in the event the account becomes delinquent and is
turned over to any attorney for collection, reasonable attorney fees plus all court costs. Venue wil
be at the discretion of Portland Bolt & Manufacturing, Inc.

Officer of the Company	Title	Date	
Company Name			

Please email both pages to our credit department ar@portlandbolt.com

Mailing Address:

PO Box 2866 Portland, OR 97208 (800) 547-6758

Fax: (503) 323-0433 www.portlandbolt.com sales@portlandbolt.com

Physical Address:

3441 NW Guam St Portland, OR 97210