



6082 Schumacher Park Dr.  
West Chester, OH 45069  
800-822-7437  
513-777-5374 Fax  
www.magnumpiering.com

Please complete our customer credit application by **printing** legibly & neatly.  
You may fax the completed application to 513.777.5374.  
*Thank you.*

Legal Company Name: \_\_\_\_\_  
DBA, (if any): \_\_\_\_\_  
Entity Type:  Corporation  LLC  Partnership  Sole Proprietor Fed. ID#: \_\_\_\_\_  
Services Offered: \_\_\_\_\_  
Years in Business: \_\_\_\_\_ State of Formation: \_\_\_\_\_ DUNS#: \_\_\_\_\_ Contractor License: \_\_\_\_\_  
Shipping Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Website: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Procurement Manager: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Billing Address (if different): \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Accounts Payable Manager: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Credit Limit Request: \_\_\_\_\_

---

**Principal Officers / Directors / Proprietors / Managers**

Name	Title	SSN
_____	_____	_____
_____	_____	_____

---

**Bank References:**

(1) Bank Name: \_\_\_\_\_ Account Type: \_\_\_\_\_ Account # \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax # \_\_\_\_\_  
(2) Bank Name: \_\_\_\_\_ Account Type: \_\_\_\_\_ Account # \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Trade References** (Please provide references that support credit limit request):

(1) Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Account #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
(2) Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Account #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
(3) Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Account #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_



6082 Schumacher Park Dr.  
West Chester, OH 45069  
800-822-7437  
513-777-5374 Fax  
www.magnumpiering.com

Please complete our customer credit application by **printing** legibly & neatly.  
You may fax the completed application to 513.777.5374.

*Thank you.*

**In this Application for Credit, "MAGNUM" means Magnum Piering, Inc.**

**1. Consumer credit information (Section 18K(1)(b), Privacy Act 1988)**

If MAGNUM considers it relevant to assessing your application for commercial credit, you agree to MAGNUM obtaining a credit report containing personal credit information from a credit reporting agency.

**2. Exchanging information with other credit providers (Section 18N(1)(b), Privacy Act 1988)**

You agree to MAGNUM obtaining personal information about your company from other credit providers, whose names are provided in this application or that may be named in a credit report, for the purpose of assessing your application for commercial credit.

**3. Agreement to a credit provider being given a consumer credit report to collect overdue payments on commercial credit (Section 18K 1(h) Privacy Act 1988)**

You agree that MAGNUM may obtain a consumer credit report about your company from a credit reporting agency for the purpose of collecting overdue payments relating to commercial credit owed by your company.

**4. Payment**

- a) Payment shall be made by the Customer immediately upon receipt of material shipment and is considered overdue if payment is not received within 30 days from the Invoice date unless otherwise agreed in writing.
- b) Interest may be charged on overdue amounts at the rate of 2% per month
- c) Legal costs for recovery of any overdue amounts will be recoverable as a debt due by the Customer

**5. Freight & Taxes**

- a) Customer is responsible for paying for all shipping and applicable sales or use tax.
- b) Products will be shipped FOB from MAGNUM warehouse in West Chester, OH
- c) Insurance of goods will be the responsibility of the Customer and as such MAGNUM holds no responsibility for goods damaged in transit
- d) Goods will be deemed to have been delivered at the time they are loaded for transport

**6. Returns**

The return of goods for credit will not be accepted. All sales are final.

The undersigned represent agree to the terms and conditions set forth in this application. We hereby certify that all statements in this application are true and complete and are made for the purpose of obtaining credit. If our account is not paid as agreed according to invoice terms, we promise to pay a late payment charge of 2% per month on the unpaid balance, and to reimburse MAGNUM all costs of collections, including legal fees.

Name (please print) \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

***Magnum Piering, Inc. is the recognized leader in providing high quality, competitively priced foundation systems and services. We are committed to exceeding our customers' needs through focused efforts on continuous improvement and customer service.***