



Credit Application

Company Information

Legal Name of Business:	
Years in Business:	
Street Address:	
City/State/Zip:	
Type of Entity:	

Owner Information

Owner/s Name:	
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Primary Bank Reference

Bank Name:	
Account #:	
Street Address:	
City/State/Zip:	
Type of Account:	
Contact Name and Email:	

Accounts Payable Information

Primary Contact:	
Title:	
Phone	
Email:	

Trade Reference # 1	
Business Name:	
Phone #:	
Street Address:	
City/State/Zip:	
Contact Name And Email:	

Trade Reference # 2	
Business Name:	
Phone #:	
Street Address:	
City/State/Zip:	
Contact Name And Email:	

Trade Reference # 3	
Business Name:	
Phone #:	
Street Address:	
City/State/Zip:	
Contact Name And Email:	

The undersigned Applicant understands and agrees that the terms and conditions on company website (vplogistics.com) shall govern its open account with Visual Pak Logistics, LLC and makes the presentations contained herein in order to induce Visual Pak Logistics, LLC to extend credit to the Applicant. 1) I/We certify that the above information is correct and complete, and further understand that Visual Pak Logistics, LLC shall reply on this information for the extension of credit and from time to time to obtain credit reports on Applicant or any individuals listed above or to obtain credit and funding information from other persons or entities listed above 2) The Applicant shall pay Visual Pak Logistics, LLC in full for any invoices according to the terms extended. 3) Should the Applicant default in making any payment required by the terms hereof, and should Visual Pak Logistics, LLC place Applicant's account with any attorney for collection, Applicant will pay all costs of collections, including reasonable attorney fees for the amount in default. 4) Failure to comply with the terms of this agreement may result in the suspension or termination of the agreement as determined by Visual Pak Logistics, LLC in its sole discretion. 5) This agreement shall be construed and enforced according to the laws of the State of Illinois and the parties submit to venue in Lake County, Illinois, if suit is brought to collect any balance owed hereunder.

Business Name:

Authorized Signature:

Printed Name & Title:

Date:
