



2501 S. Grandview Avenue, Odessa, TX 79766
 PH (432) 362-9161 Web: www.rextac.com
 Return completed signed application to: ar@rextac.com

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Company Name:		PO Used: Y N	
A/P Contact:		Email:	
Phone:		Fax:	E-mail:
Bill to address:			
City:		State:	ZIP Code:
Date business commenced:			
Type of Entity:	Sole Proprietorship	Partnership	Corporation Other
Tax ID#:		Dun & Bradstreet# (If Applicable):	

OFFICERS

President/CEO:	E-mail:
CFO/Controller:	E-mail:

Owners (For Partnership and Sole Proprietorship, include Social Security numbers)

Name:	SS#/Tax ID:	Percent Ownership:
Address:		
City:	State:	ZIP Code:
Name:	SS#/Tax ID:	Percent Ownership:
Address:		
City:	State:	ZIP Code:
Name:	SS#/Tax ID:	Percent Ownership:
Address:		
City:	State:	ZIP Code:

BUSINESS AND CREDIT INFORMATION

Primary business address:		
City:	State:	ZIP Code:
How long at current address?		
Telephone:	Fax:	E-mail:
Bank name:		Bank Address:
Bank Contact:		Contact Email:
City:	State:	ZIP Code:
Phone:		
Type of account: Savings Checking		Account Number:
Credit Amount Requested:		Sales Contact at REXTAC LLC:

BUSINESS INFORMATION**COMPANY NAME:****ADDRESS:****CITY:****STATE:****ZIP CODE:****PHONE:****FAX:****E-MAIL:****COMPANY NAME:****ADDRESS:****CITY:****STATE:****ZIP CODE:****PHONE:****FAX:****E-MAIL:****COMPANY NAME:****ADDRESS:****CITY:****STATE:****ZIP CODE:****PHONE:****FAX:****E-MAIL:****AGREEMENT**

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize REXtac LLC. to make inquiries into the banking and business/trade references that you have supplied, and that all the above information is correct.

THE SIGNATORY BELOW HEREBY ATTESTS APPLICANT'S FINANCIAL RESPONSIBILITY, ABILITY AND AGREEMENT TO PAY ALL SUMS PROPERLY DUE AND OWING PURSUANT TO REXTAC INVOICES. IN CONSIDERATION FOR REXtac, LLC'S AGREEMENT TO EVALUATE APPLICANT'S CREDIT WORTHINESS, APPLICANT HEREBY ACKNOWLEDGES RECEIPT OF AND AGREES THAT ANY PURCHASE BY APPLICANT OF REXtac LLC PRODUCTS WILL BE MADE PURSUANT TO THE GENERAL TERMS AND CONDITIONS GOVERNING SALE ATTACHED HERETO.

THE ABOVE INFORMATION IS PROVIDED BY APPLICANT FOR THE PURPOSE OF OBTAINING CREDIT AND IS WARRANTED TO BE TRUE, CORRECT AND COMPLETE. APPLICANT HEREBY AUTHORIZES REXtac, LLC TO INVESTIGATE THE INFORMATION AND TRADE AND BANK REFERENCES LISTED ABOVE PERTAINING TO APPLICANT'S CREDIT AND FINANCIAL RESPONSIBILITY. ALL DECISIONS MADE BY REXtac, LLC WITH RESPECT TO THE EXTENSION, CONTINUATION OR DISCONTINUATION OF CREDIT TO APPLICANT SHALL BE MADE PURSUANT TO REXtac, LLC'S SOLE DISCRETION.

SIGNATURES**Title:****Date:****Title:****Date:**

