



1-800-888-7167
1-901-860-2342 Direct Line
Fax: 1-901-860-2345

Total Pages: _____

To:

Company:

Fax #:

Date:

From: Sara Graham, Credit Manager

CC: File

Credit Application and Procedures

If you are interested in opening an account with American-Marsh Pumps, please complete the following credit application form in its entirety. The credit application should be signed by an officer or partner (corporation or partnership), and by the owner if it is a sole proprietorship.

If you have a credit information form with your company's credit references and banking information, please complete the name, address and officer information section on the application, sign, date and attach your credit information form.

Please note that the Terms and Conditions of Sale are attached as part of this document. Sign and date pages 1, 2 & 3.

If you have a sales tax resale certificate, please include a copy with your credit application. Without a copy of the sales tax resale certificate, we must charge sales tax by law.

Please return your signed credit application to **Sara Graham, American-Marsh Pumps, 185 Progress Road, Collierville TN 38017 or by fax to (901) 860-2345.**

Thank you for your interest in American-Marsh Pumps. We look forward to doing business with you.

- 185 Progress Road • Collierville, Tennessee 38017 • PHONE: 800-888-7167 • FAX: 901-860-2323 •
- <http://www.american-marsh.com> •

ISO 9001:2000 Certified





APPLICATION FOR CREDIT

Complete Business Name: _____

Address-(mailing) : _____
 City _____
 State ____ Zip _____ Phone _____ Fax _____
 Business Started _____

Business Type: () Proprietorship () Partnership () Corporation

OFFICERS

Name	Title	S/S No.
_____	_____	_____
_____	_____	_____

Accounts Payable Contact _____
 Fax _____
 Email Address: _____

CREDIT INFORMATION

Bank Account Number: _____
 Name: _____ Fax #: _____
 Phone #: _____ Person to Contact: _____

LIST OR ATTACH MINIMUM OF THREE SUPPLIERS

*should match the credit line you are seeking

- Name: _____ Fax #: _____
 Person to Contact: _____ Account #: _____
- Name: _____ Fax #: _____
 Person to Contact: _____ Account #: _____
- Name: _____ Fax #: _____
 Person to Contact: _____ Account #: _____

The undersigned certifies that there is a registration or seller no. _____
 Issued by the State of _____ (Please attach a copy of your exemption certificate, without a copy you will be taxed).

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If any default in payment of amounts due to AMERICAN MARSH PUMPS occurs, AMERICAN MARSH PUMPS shall be entitled to collect all cost incurred to collect the obligation, including (but not limited to) reasonable attorney fees and legal expenses. AMERICAN MARSH PUMPS shall also be entitled to collect interest on the obligation at the maximum rate permitted by law. I have reviewed and understand AMERICAN MARSH PUMPS' Terms and Conditions of Sale, Warranty policy and Returned Goods policy.

I ACKNOWLEDGE RECEIPT OF AMERICAN MARSH PUMPS' STANDARD TERMS & CONDITIONS OF SALES, WARRANTY POLICY AND RETURNED GOODS POLICY. BY SIGNING BELOW I AFFIRM THAT I HAVE RECEIVED AND READ SAID DOCUMENTS AND FULLY UNDERSTAND THE TERMS CONTAINED THEREIN, AS WELL AS THE TERMS STATED HEREON.

SIGNATURE/TITLE * _____ DATE _____
** Must be a COMPANY PRINCIPAL*

Please use one of the following methods to apply: e-mail to: sara.graham@american-marsh.com fax: 901-860-2342, or mail: American Marsh Pumps, 185 Progress Road, Collierville, TN 38017. We must receive a signed copy before we can begin the approval process.

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- <http://www.american-marsh.com> •



ISO 9001:2000 Certified

SINCERT

