

# O'KEEFE'S REEF



## "For Those That Live It!" CREDIT APPLICATION

COMPANY NAME \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
TELE: \_\_\_\_/\_\_\_\_/\_\_\_\_ FAX: \_\_\_\_/\_\_\_\_/\_\_\_\_  
STATE TAX # \_\_\_\_\_

### TRADE REFERENCES

1. NAME: \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY/STATE/ZIP \_\_\_\_\_  
PHONE/FAX \_\_\_\_\_
2. NAME: \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY/STATE/ZIP \_\_\_\_\_  
PHONE/FAX \_\_\_\_\_
3. NAME: \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY/STATE/ZIP \_\_\_\_\_  
PHONE/FAX \_\_\_\_\_

### TERMS

1. C.O.D. or CREDIT CARD. YES \_\_\_\_\_ NO \_\_\_\_\_
2. NET 30 \_\_\_\_\_ (Credit Card Back-up)

We ask for a Credit Card back-up on all Net 30 terms. Credit Card will be used only if goods are not paid for within 45 days.

Card Number \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Billing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree to the above terms:

Authorized Signature \_\_\_\_\_