



**Lally Pipe & Tube**  
Division of LB Industries, Inc.  
P.O. Box 15430 - Latonia Station  
Covington, Kentucky 41015  
859-431-8300  
Fax: 859-431-1577  
Website: www.lallypipe.com

## APPLICATION FOR CREDIT

The Undersigned hereby makes this application for credit to LALLY PIPE & TUBE ("creditor"), and in making this application the undersigned agrees that all amounts payable on or before the due date as shown on each invoice will be paid, and if not paid on or before said date, are then delinquent. Should a credit availability be granted by Creditor, all decisions with respect to the extension or continuation of credit shall be at the sole discretion of creditor. Creditor may terminate any credit availability within its sole discretion. It is understood that creditor may impose and charge a finance charge or delinquency charges which is the lower of one and one-half (1 ½ %) percent per month or the highest rate allowed by law on any amount which becomes past due and delinquent. Additionally the undersigned shall be responsible for all collection costs and attorney fees in connection with any delinquent amount.

COMPLETE NAME: \_\_\_\_\_  
BILLING ADDRESS: \_\_\_\_\_  
PHYSICAL ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
WEBSITE ADDRESS: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

LEGAL STATUS: \_\_\_\_\_ PROPRIETORSHIP \_\_\_\_\_ PARTNERSHIP  
\_\_\_\_\_ CORPORATION \_\_\_\_\_ STATE OF INCORPORATION

HOW LONG IN BUSINESS: \_\_\_\_\_ IF LESS THAN 3 YEARS, PLEASE INCLUDE FINANCIALS

PRINCIPALS: \_\_\_\_\_ TITLE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACCOUNTS PAYABLE CONTACT: \_\_\_\_\_

NAME OF BANK: \_\_\_\_\_ ACCT. #: \_\_\_\_\_

PHONE: \_\_\_\_\_

TRADE REFERENCE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

TRADE REFERENCE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

TRADE REFERENCE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

The person signing this application certifies that all of the information contained above and any attachments are true and correct to the best of their information, knowledge and belief.

DATE: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

## BLANKET CERTIFICATE OF EXEMPTION

The undersigned hereby claims exemption to purchases of tangible personal property from \_\_\_\_\_ on and after \_\_\_\_\_ and certifies that this claim is based upon the purchaser's proposed use of the items purchased, the activity of the purchaser, or both, as shown herein:

\_\_\_\_\_  
\_\_\_\_\_

PURCHASER MUST STATE STATUTORY REASON FOR CLAIMING EXEMPTION OR EXCEPTION

This certificate shall continue in force until revoked and shall be considered a part of each order given to the above named vendor unless the order specifies otherwise.

\_\_\_\_\_  
(Purchaser's Name)

\_\_\_\_\_  
(Purchaser's Activity, i.e. Manufacturer, Public Utility, Church, etc.)

\_\_\_\_\_  
(Purchaser's Address)

\_\_\_\_\_  
(By-Signature and Title)

\_\_\_\_\_  
(Date Signed)

Vendor's License, if any \_\_\_\_\_

\_\_\_\_\_  
Sales Tax Exempt #

\_\_\_\_\_  
State