

Neutron, Inc.220 Reese Road
State College, PA 16801TEL: 814-237-0902
FAX: 814-861-8137www.neutronusa.com
info@neutronusa.com

Credit Application

In order to promptly process your application, please provide the most complete information to Neutron, Inc. for credit review. The following 4-step procedure will guide you through the application for your corporation account. Please fill out the forms and submit them to Neutron, Inc. Neutron, Inc. will not process your application until the completion of all four steps.

STEP-1 COMPANY INFORMATION

Company or corporation name: _____

TEL: () _____ FAX: () _____

Have you ever applied for a credit account with Neutron, Inc. before? Yes No

Billing Address: _____

City: _____ State: _____ Zip code: _____

Shipping Address: _____

City: _____ State: _____ Zip code: _____

Accounts payable contact name: _____ TEL: () _____

Controller's name: _____ TEL: () _____

Date company established (MM/DD/YYYY) : ____/____/____

Annual sales volume: _____

Estimated monthly purchase volume: _____

Are financial statements available? Yes No (if yes, please fax them to Neutron at 814-861-8137)

Number of employees: _____

Business is: Corporation Partnership Proprietorship

Resale/sales tax #: _____ Federal ID: _____

State of incorporation: _____

Subsidiary of (if applicable) _____

Name of one of proprietors: _____

Address: _____

City: _____ State: _____ Zip code: _____

Home phone: () _____

Social Security Number: _____

STEP-2 FINANCIAL INFORMATION & CREDIT REFERENCES

Bank name: _____

Contact name: _____ TEL: () _____

Address: _____

City: _____ State: _____ Zip code: _____

Date account established (MM/DD/YYYY) : ____/____/____

Type of account: Checking No. : _____

Savings No. : _____

Loan No. : _____

Credit Reference 1:

Business name: _____

Contact name: _____

TEL: () _____ Account number: _____

Address: _____

City: _____ State: _____ Zip code: _____

Credit Reference 2:

Business name: _____

Contact name: _____

TEL: () _____ Account number: _____

Address: _____

City: _____ State: _____ Zip code: _____

Credit Reference 3:

Business name: _____

Contact name: _____

TEL: () _____ Account number: _____

Address: _____

City: _____ State: _____ Zip code: _____

Credit Reference 4:

Business name: _____

Contact name: _____

TEL: () _____ Account number: _____

Address: _____

City: _____ State: _____ Zip code: _____

STEP-3 USE OF TAX EXEMPTION

The undersigned hereby certifies he/she holds a valid sales and use tax certificate for _____
the State of and that he/she is principally engaged in the business of selling _____.

The undersigned also certifies that the tangible personal property, described as follows,

Which he/she shall purchase from Neutron, Inc. whose corporate headquarters are located at
220 Reese Road
State College, PA 16801

will be used for the purpose indicated below (please check which applies):

- Resale in its present form
- Resale as converted into or as a component of a product produced by the undersigned

The undersigned certifies he/she will accrue and pay any applicable use tax on any tangible personal property obtained under this certificate of exemption if it is used or consumed by the purchaser.

I declare under penalty of perjury that it is my belief that Neutron, Inc. is not required to collect the sales or use tax on the transactions covered by this certificate, and to the best of my knowledge and belief is true and correct, made in good faith, pursuant to the sales and use tax laws of the aforementioned state.

PURCHASER's FIRM NAME: _____

CERTIFICATE OF REGISTRATION NUMBER: _____

ADDRESS: _____

NAME: _____

SIGNATURE: _____

TITLE: _____

STEP-4 FINANCIAL AUTHORIZATION

Please accept this authorization to release the following information to Neutron, Inc. for the purpose of extending credit. We understand that this information will be kept in strictest confidence between your organization and Neutron, Inc.

Checkout account No. : _____

Savings account No.: _____

Loan account No. : _____

Date: ____ / ____ / ____

Authorized signature: _____