

75 Mill Street
Colchester, Connecticut 06415
Phone: (800) 243 9232

Email Credit Application to:
arpayment@ssww.com
or mail to the above address



APPLICATION FOR CREDIT

Below is the information we will need to process your application for credit with S&S Worldwide for your business.

**Customer's Official
(Corporate) Name**

Corporate Office
Address
Finance Officer or
Controller's Name

Tel. #

Email:

City

State

ZIP

Tel #

Email:

Tel. #

Email:

D/B/A Name

Address

City

State

Zip

Billing Information (Telephone and Email required)

Name:

Attention of :

Title:

Address:

Telephone #

City:

State:

Zip

Fax #

Email Address

Shipping Information:

Name:

Address:

Telephone #

Email Address

City

State:

Zip

Fax #

Principals

Name:

Title:

Name:

Title:

Location & Year in Business

If Corporation:

Year Incorporated:

State

Principal Stockholder's Name

Nature of Business

Credit Line Requested : \$ _____ (Required)

Trade References and Credit Reports (In order for S&S Worldwide to evaluate your application for credit, S&S Worldwide may contact trade references and solicit information, including Credit Reports, regarding your business. Your signature on the bottom of this page indicates your authorization for S&S Worldwide to initiate this process.)

1. Name of Business	Address	Tel #
_____	_____	_____
Contact Person		Email: (REQUIRED)
_____	_____	_____
2. Name of Business	Address	Tel #
_____	_____	_____
Contact Person		Email: (REQUIRED)
_____	_____	_____
3. Name of Business	Address	Tel #
_____	_____	_____
Contact Person		Email: (REQUIRED)
_____	_____	_____

Tax Exempt Information

If applicable, please include any and all tax exempt certificates when submitting this application.

We Accept the Below Forms of Payment:

ACH
Check
Check by Phone
Credit Card

TERMS, CONDITIONS and AGREEMENT

S&S Worldwide, Inc: Credit Net Term = 30 Days: *Payment of invoice must be received within 30 days from date of issuance. Non Payment of Invoice: S&S Worldwide reserves the rights to pursue payments of unpaid and past due invoices by taking legal measures including, but not limited to, referral of all unpaid invoices to an outside collection agency and/or attorney. All legal costs and fees incurred during the collection process will be the responsibility of the Debtor and/or Applicant.*

Completed by (Print Your name): _____	Title: _____	Date: _____
Sign (Signature Required)	Required	Required