



Application for credit line with Sullivan Investment Co., Inc. and Subsidiaries  
Sullivan Tire Companies and Lift Works Corporation (hereinafter "Sullivan")

Corporate Office:  
41 Accord Park Drive, Norwell MA 02061  
Email: [creditteam@sullivantire.com](mailto:creditteam@sullivantire.com) Phone # 781-261-0288; Fax 781-982-0338

**Applicant Name** \_\_\_\_\_

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

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

Street Address if different \_\_\_\_\_

**Telephone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_

**Email:** \_\_\_\_\_

Federal Tax # \_\_\_\_\_

Sales Tax Exempt? Yes / No

(If yes, please note that we must have a sales tax exemption/resale certificate enclosed with this credit application)

Type of Business \_\_\_\_\_ Start Date of Business \_\_\_\_\_ Number Employees \_\_\_\_\_

Have you filed bankruptcy? Yes / No Annual Sales \$ \_\_\_\_\_ Number of Vehicles \_\_\_\_\_

**Please indicate your company's legal status:**

Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ LLC \_\_\_\_\_

**Owner/Principle** \_\_\_\_\_ **Title** \_\_\_\_\_

Percent ownership (    %)

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

**Owner/Principle** \_\_\_\_\_ **Title** \_\_\_\_\_

Percent ownership (    %)

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

**Accounts Payable Contact:** \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

The monthly credit line requested is \$ \_\_\_\_\_

Purchase order required? Yes / No

Sullivan sales representative if known \_\_\_\_\_

**Banking reference information:**

Bank name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_ Account number: \_\_\_\_\_

**Trade references:**

**Company Name:** \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Company Name:** \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Credit terms:**

The credit terms provided by Sullivan are in its sole discretion and can be terminated at any time by Sullivan.

Payments are due net 25 days from statement date. A service charge of 1.5% per month (18% per annum) may be assessed on past due invoices. Payment method options are check mailed to our lockbox or bank ACH with ACH being the preferred and most secure method.

Applicant hereby grants to Sullivan a security interest in any and all purchases (the "Collateral") made by Applicant from Sullivan and hereby authorizes Sullivan to execute and file on behalf of the Applicant any such UCC filing and continuation statements as Sullivan deems necessary to perfect its security interest in the Collateral.

The Applicant agrees to provide an updated credit application upon request to assist with annual and periodic review of credit lines with Sullivan.

I (the signer) authorize the release of my bank information either directly or through Confirmation.com for the purposes of establishing a credit line with Sullivan.

By signing this credit application, the signer agrees to all terms and conditions as stated above.

Signature \_\_\_\_\_ Printed name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_