

**NILFISK, INC.**  
**Credit Application**

**Nilfisk US brands: Advance, Clarke, Viper and Nilfisk HPW: Pressure-Pro and Hydro Tek**

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

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Street Address \_\_\_\_\_ PO Box #: \_\_\_\_\_

City, ST, Zip \_\_\_\_\_ City, ST, Zip: \_\_\_\_\_

Credit Line Requested: \$ \_\_\_\_\_ Federal ID #: \_\_\_\_\_ Sales Tax Exempt#: \_\_\_\_\_

(Attach completed Resale Certificate)

Years in Business: \_\_\_\_\_ Years Under Present Owner: \_\_\_\_\_ Fiscal Year End: \_\_\_\_\_

Principal (s): \_\_\_\_\_ A/P Contact: \_\_\_\_\_

Organization Type:  Corporation  Partnership  Individual  Subchapter S  LLC  
Business Type:  Commercial  Industrial  Contractor  National  Other

If requested, attach last two year-end audited Financial Statements: (20 \_\_\_\_\_), (20 \_\_\_\_\_)

**REFERENCES** Has the company or any officer/owner ever filed bankruptcy: \_\_\_ NO \_\_\_ YES (if yes, provide details)

**Bank:** \_\_\_\_\_ Contact: \_\_\_\_\_  
Street Address \_\_\_\_\_ Phone: \_\_\_\_\_ Fax # \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ Account #: \_\_\_\_\_

**Supplier:** \_\_\_\_\_ Contact: \_\_\_\_\_  
Street Address \_\_\_\_\_ Phone: \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ Fax: \_\_\_\_\_  
Credit Line: \_\_\_\_\_

**Supplier:** \_\_\_\_\_ Contact: \_\_\_\_\_  
Street Address \_\_\_\_\_ Phone: \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ Fax: \_\_\_\_\_  
Credit Line: \_\_\_\_\_

**Supplier:** \_\_\_\_\_ Contact: \_\_\_\_\_  
Street Address \_\_\_\_\_ Phone: \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ Fax: \_\_\_\_\_  
Credit Line: \_\_\_\_\_

I authorize Nilfisk, Hydro Tek and Pressure-Pro to obtain information concerning any statements made herein and understand that a credit report may be requested in connection with this application and any subsequent update, renewal or extension of credit. Applicant's signature attests to financial responsibility, ability and willingness to pay Nilfisk US Brands, Hydro Tek, Pressure-Pro per invoice payment terms. Applicant acknowledges and authorizes a monthly interest charge of 1.5% on any past due amounts. To the best of my knowledge, the information I have provided is true. In the event a third party is involved in collecting an outstanding debt, I/we agree to pay attorney fees and any collection costs, whether or not a suit has been filed.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature \_\_\_\_\_ Title: \_\_\_\_\_  
(Must be signature of Owner or Authorized Officer)

**For Corporate Applications: I hereby guarantee with my personal and corporate assets the payment, in full, of all invoices due Nilfisk, Hydro Tek and Pressure-Pro. (to be signed by a controlling officer) X \_\_\_\_\_ Date: \_\_\_\_\_**  
Printed name: \_\_\_\_\_ SS#: \_\_\_\_\_

Credit department fax numbers: Pressure-Pro 772-461-3319 Hydro Tek 909-799-9888 Nilfisk 763-745-3897

