

Southeastern Safety Products, Inc.

d/b/a Rescue Technology , Tactical Tech
 251 Beulah Church Rd., Carrollton, GA 30117
 770.832.9694 Fax 770.832.1676
 www.rescuetech1.com



Credit Application

Business Information	
Legal Name:	
d/b/a	
Billing Address	
City/State/Zip	
Shipping Address	
City/State/Zip	
Phone:	
Fax:	
Email:	
Website:	
Year Established	
Business Type	Partnership Corporation Individual Other
A/P Contact	
A/P Phone:	
A/P Email	
Federal I.D. or Social Security #	

Bank Reference	
Bank	
Address	
City/St/Zip	
Telephone	Fax
Contact Name	
Acct#:	

Trade References	
1. Name	
Address	
City/St/Zip	
Telephone	
Fax	
Contact	
2. Name	
Address	
City/St/Zip	
Telephone	
Fax	
Contact	
3. Name	
Address	
City/St/Zip	
Telephone	
Fax	
Contact	
4. Name	
Address	
City/St/Zip	
Telephone	
Fax	
Contact	

Agreements		
<p>I have completed this application to obtain credit. I authorize Rescue Technology to check all information listed, including the banking institution(s), for the purpose of checking my credit history. In consideration for the extension of credit, including acceptance of company check for C.O.D and prepaid accounts, I agree to the terms and conditions published by Rescue Technology to pay such finance charges as specified therein and to pay such collection costs, court costs and reasonable attorney's fees as required for collection. I agree that this application and agreement shall be governed by the laws of the State of Georgia. I understand that the information provided on this application is for the purpose of obtaining business credit from Rescue Technology, and I confirm to you that I am authorized in my capacity to bind my firm accordingly. I agree that all accounts or monies owed to Rescue Technology shall be due and payable at their place of business and that all past due accounts, notes or judgements shall automatically draw interest at the rate of 18% annually. I acknowledge that all terms are based upon the invoice date, and not the date I receive the merchandise. I HAVE READ AND UNDERSTAND THE ABOVE AGREEMENT AND WARRANT THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE.</p>		
Signature	Title	Date

Are the items Purchased for Resale? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, complete Dealer Application

Approved:	Y / N
By / Date:	_____
Level	_____
Limit	_____
Terms	_____
Class	_____
SLS	_____
Class	_____
