



MULTI PACKAGING SOLUTIONS

**MPS Locations: Application for Credit**

|   |   |   |  |   |  |
|---|---|---|--|---|--|
| 13465 Jupiter Rd<br>Dallas, TX 75238        | 901 Durham Ave<br>South Plainfield, NJ 07080    | 5800 W Grand River Ave<br>Lansing, MI 48906 | 4325 Shepherdsville Rd<br>Louisville, KY 40218     | 4025 Third Parkway<br>Terre Haute, IN 47804 | 1275 Los Angeles St.<br>Glendale, CA 91204 |
| 1703 South Brook St<br>Louisville, KY 40208 | 2020 Production Drive<br>Indianapolis, IN 46241 | 502 Eastern Ave<br>Allegan, MI 49010        | 7915 Industrial Village Rd<br>Greensboro, NC 27409 | 13 West Fourth Street<br>Holland, MI 49423  | 79 Clover<br>Holland, MI 49423             |

Legal Name\* \_\_\_\_\_ MailingAddress\* \_\_\_\_\_

Street Address\* \_\_\_\_\_ City\* \_\_\_\_\_ State\* \_\_\_\_\_ Zip\* \_\_\_\_\_

Home Office Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone\* \_\_\_\_\_ Fax \_\_\_\_\_

**BUSINESS INFORMATION \* (Complete one type)**

Sole Proprietorship \_\_\_\_\_ SS # \_\_\_\_\_

Partnership/LLC Partner \_\_\_\_\_ Federal Tax No. \_\_\_\_\_

Partner \_\_\_\_\_ Type of business \_\_\_\_\_

Corporation President \_\_\_\_\_ Federal Tax No. \_\_\_\_\_

Vice President \_\_\_\_\_ Type of business \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

**FINANCIAL INFORMATION**

Credit Card Type: \_\_\_\_\_ Card No: \_\_\_\_\_ Exp date: \_\_\_\_\_ Card holder name: \_\_\_\_\_

SIC \_\_\_\_\_ Year business established \* \_\_\_\_\_ Dun & Bradstreet No \_\_\_\_\_

Estimated Annual Sales\* \_\_\_\_\_ Credit Amount Requested \* \_\_\_\_\_

Total Assets \_\_\_\_\_ Total Liabilities \_\_\_\_\_ Net Worth \_\_\_\_\_

**BANKING INFORMATION**

Bank \_\_\_\_\_ Branch \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact \_\_\_\_\_ Account No. \_\_\_\_\_ Type of Account \_\_\_\_\_

Contact Email \_\_\_\_\_ Account No. \_\_\_\_\_ Type of Account \_\_\_\_\_

**TRADE REFERENCES \***

| Business Name | Contact | Address | Phone | Email/Fax |
|---------------|---------|---------|-------|-----------|
|               |         |         |       |           |
|               |         |         |       |           |
|               |         |         |       |           |

Please return to: PO Box 17099, Lansing MI 48901-7099 or Fax: 800-804-3820 or  
E-mail: Incustomercreditapp@multipkg.com

\* Required Field



Terms of sale, including terms of payment and charges, for each purchase are agreed to be those specified on the face of each invoice from Multi Packaging Solutions. The applicant hereby agrees to pay all costs of collection and legal fees should any action or efforts to collect any unpaid balance be necessary. The applicant agrees to pay all service charges added each month on past due balances. A service charge of 1.5% will be added to balances over 30 days.

The above information is willingly supplied for the purpose of obtaining credit and the applicant warrants all such information to be true and correct as of the date hereof. Multi Packaging Solutions is authorized to contact the above bank and trade references to support the creditworthiness of the above named applicant. Multi Packaging Solutions is authorized to obtain credit reports on the proprietors, partners or principals of the applicant. Should credit be extended by Multi Packaging Solutions, which is at its sole discretion, all decisions with respect to the extension or continuation of such credit shall also be in the sole discretion of Multi Packaging Solutions. Multi Packaging Solutions may terminate any credit availability within its sole discretion, in which case any outstanding balance, including service charges and other fees, shall be immediately due and payable in full.

The applicant agrees to provide Multi Packaging Solutions with updated credit information on request as a condition for the continued extension of credit. Applicant understands that Multi Packaging Solutions may report the payment history of applicant to credit reporting agencies in accordance with applicable laws.

This is governed by Michigan law, and any and all actions arising hereunder shall be filed and maintained in Michigan state or federal court.

**Applicant's signature attests financial responsibility, ability and willingness to pay in accordance with above terms.**

**Business Name**

\_\_\_\_\_

**Print Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Date** \_\_\_\_\_