



CREDIT APPLICATION & SALES AGREEMENT

GENERAL INFORMATION			
Business Name / DBA	Financial Contact Name		
Shipping Address (Street)	City	State	Zip
Billing Address (Street/P.O. Box)	City	State	Zip
Telephone	FAX Number		
Type of Business (Corporation, Partnership, Sole Proprietorship)	Yrs. In Business	Requested Credit Line	
If a Corporation: Year of Incorporation: _____ State of Incorporation: _____			
Subsidiary of			
OWNER / OFFICER INFORMATION			
Owner / Officer Name	SSN (If Partnership or Sole Proprietor)		
Address (Street)	City	State	Zip
Owner / Officer Name	SSN (If Partnership or Sole Proprietor)		
Address (Street)	City	State	Zip
BUSINESS TRADE REFERENCES			
Company Name	Financial Contact Name	Telephone	Fax (required)
Address (Street)	City	State	Zip
Company Name	Financial Contact Name	Telephone	Fax (required)
Address (Street)	City	State	Zip
Company Name	Financial Contact Name	Telephone	Fax (required)
Address (Street)	City	State	Zip
BANK REFERENCES			
Bank Name	Contact Name	Telephone	Fax (required)
Address (Street)	City	State	Zip
Commercial Checking Account Number	Loan Account Number		
As an officer of the above named company, I do hereby give my consent to check any agencies or companies necessary in processing this credit and sales agreement. I certify that the above information is true and correct and in addition to the foregoing, promise to pay for all purchases in accordance with the terms of sales. I further agree to pay for all collection costs, to include reasonable attorney fees, incurred by Mueller Industries, Inc. if made necessary by failure to comply with the payment terms of sale.			
SIGNATURE OF OWNER / OFFICER	TITLE	DATE	
FOR OFFICE USE ONLY			
Sales Manager Approval	Salesman's Name & Number	Order Center Identification	
Requested Credit Line	Customer Type Code	Terms	
Credit	Credit Line	Credit Manager	

PLEASE ATTACH A CURRENT SET OF FINANCIAL STATEMENTS