

Larsen Packaging Products, Inc.

425 S. 37th Ave

St. Charles, IL. 60174

Phone 630-384-1130

Fax 630-384-1137

Email: sales@larsenpackaging.com



CREDIT AGREEMENT

I/WE ACKNOWLEDGE THAT ANY CREDIT GRANTED FOLLOWING THIS APPLICATION IS SUBJECT TO THE TERMS AND CONDITIONS STATED IN THIS APPLICATION.

Payment terms are Net 30 Days unless otherwise noted, payment being due within 30 days from the date of invoice.

IN THE EVENT THAT THIS ACCOUNT BECOMES DELINQUENT, WE THE VENDOR RESERVE THE RIGHT TO PURSUE COLLECTIONS OF OUTSTANDING AMOUNTS.

THE COLLECTION COSTS, ATTORNEY FEES AND COURT COSTS WILL BE PASSED ON TO THE CUSTOMER.

I/WE ACCEPT AND AGREE TO COMPLY WITH THE ABOVE TERMS IN RESPECT TO THE PROVISIONS OF A CREDIT ACCOUNT WITH LARSEN PACKAGING PRODUCTS, INC.

Company Name: _____ Date: _____

Authorized Signature: _____ Position: _____

Do not complete (office use only)

Application received by: _____ Date: _____

Approved by: _____ Date: _____