



First Class Air Support

First Class Air Support Corporate Office

1830 Cargo Court

Louisville, KY 40299

Customer Credit Application

Company Name: _____

Headquarter Address: _____

Headquarter City & State: _____

Year Established: _____ Federal Tax ID _____

Company Type:

Airline MRO Broker OEM

Billing Address

Billing Email: _____

Address 1: _____

Address 2: _____

City: _____

State: _____

Zip/Postal Code: _____

Country: _____

Primary Contact

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Title: _____

CFO/COO

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Financial

Anticipated Monthly Purchases \$ _____

Tax ID _____

D & B _____

Accounts Payable

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Company Type:

Proprietorship Partnership Corporation LLC

TAX EXEMPT: _____ **IF YES, PLEASE PROVIDE APPROPRIATE TAX FORM**



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Bank Information

Bank Name: _____ Account Number: _____

Phone Number: _____ Contact Person: _____

Bank Address: _____ Bank City & State: _____

Credit References (United States Based & Minimum of 3)

	1	2	3	4
Company Name				
Contact Name				
Contact Email				
Phone Number				

If your company has a form that is pre made with the information previously requested, please send and only complete page 3.



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FINANCIAL RELEASE AUTHORIZATION

I authorize the references named herein, both financial institutions and trade references, to release any financial and credit information known to them to First Class Air Support, Inc. with the understanding that it will be used solely for credit purposes. Furthermore, if this credit application is accepted, I/We agree to pay for purchases in accordance with the terms and conditions set by First Class Air Support, Inc.

TERMS OF SALE

First Class Air Support, Inc. (the Company) provides agreed goods and services in exchange for payment within terms. It is the Company's normal policy to extend payment terms of 30 days from invoice date to qualified applicants. Payment is expected at the Company's designated address (specified on the invoice) within **30 days of the invoice date**. Thirty (30) day terms are upheld. Cash on Delivery (COD), Payment Prior to Shipment (PPS) or any other method of payment may be required pending receipt and review of a customer's credit application, financials and references. Past due accounts will be subject to a 1.5% per month interest charge. Past due accounts will result in credit hold. It is understood and agreed that, once First Class Air Support, Inc. has approved the credit application, payment will be tendered according to the assigned credit terms. First Class Air Support, Inc. may take any action required in case of failure to make payment as agreed. This may include, but is not limited to, use of outside agencies or attorneys. Costs and fees incurred by outside service agencies or attorneys will be an additional liability on the part of the debtor organization.

STATEMENT OF JOINT AND SEVERAL LIABILITY

Sole Proprietorships, Partnerships, Joint Ventures, Personally Held Corporations I (WE) agree that the Sole Proprietorship, Partnership, Joint Venture, or Personally Held Corporation indicated below will pay all invoices in accordance with agreed terms. All signatories for this organization agree, in the event of the failure of the organization to pay invoices as rendered, to personally reimburse the Company for all liabilities incurred.

Authorized Signature

First Class Air Support

Printed Name

Title

Date

Please return form back to Accounting@firstclassairsupport.com