

121 Cheshire Lane, Suite 400 Minnetonka, MN 55305 Phone: 952 903 0333 Fax: 952 903 0315 Email: AR@gotopac.com

Credit Application

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FULL BUSINESS NAME		(Fay	e i 014)				
FULL BUSINESS NAME							
STREET ADDRESS CITY		×		STATE	ZIP		
	TREET ADDRESS CIT		I.		UIAL		
PHONE	FAX	FAX		AP EMAIL			
SALES TAX STATUS (Circle One) TAX			ABLE NON-TAXABLE *(Exception certificate must be attached to receive exempt status)*				
FEDERAL TAX I.D. NUMBER	D & B NUMBER			LENGTH OF TIME IN BUSINESS			
TYPE OF BUSINESS (CHECK ONE)			PREFERRED INVOICE METHOD (CHECK ONE)				
□ Sole Proprietorship			□ AP Email				
□ Partnership							
□ Corporation							
C-Corp S-Corp			□ Hard Copy (Provide contact information below) Accounts Payable Contact Name				
□ Limited Liability Company							
State of incorporation:			Accounts Payable Contact Phone Number				
IF CORPORATION, LIMITED LIABILITY COMPANY OR PARTNERSHIP, PROVIDE THE INFORMATION FOR EACH CORPORATE OFFICER, MEMBER OR PARTNER.**							
Name, Position, Phone Number							
1							
2							
3							
BUSINESS REFERENCES.** (Must be a current supplier with whom you have done business for the last year) <u>Company Name, Address, Contact Name, Phone, Fax, Email</u>							
<u>Company Name, Address, Contact Name, Phone, Fax, Email</u> 1.							
2							
3							

** Double asterisked fields can be left blank if attaching credit reference document. F-13.0-A R.02 20191220



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TO BE COMPLETED BY APPLICA	NT*	(Page 2 of 4)	
CHECKING ACCOUNT:*	141		
Bank Name:		_ Account Numbers:	
Branch/Address:			
		FIIONE	Fax:
We authorize Production Automa	ation to inquire with our bar	nk to get references, so	lely for the purpose of establishing credit. This informatio
is held in the strictest confidence).		
Authorized Signer:*			Date:
Name (Printed):*			
Title (Printed):*			
TO BE COMPLETED BY BANK	c		
Opening Date:		12-Month Average	Balance:
NSF's:	Overdrafts:		Rating:
Loan Information			
Line of Credit		Term Loan	
Maturity Date:		Maturity Date:	
Original Balance:		Original Balance	s
Current Balance:		Current Balance	:
Available Balance:		Available Balan	ce:
Comments			

*Asterisked fields must be completed to process this credit application.



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The undersigned hereby certifies that the above information provided is true and correct and authorizes, and consents by signature below, PRODUCTION AUTOMATION to conduct normal credit investigation of the above-named applicant, including but not limited to a credit check, calling or otherwise contacting the above business references; contacting the bank set out above regarding the account(s) that the applicant has with the bank and their performance; consents to court information searches, including for judgments, pending suits and bankruptcy proceedings, whether open or closed; contacting any governmental agencies; and will cooperating in any manner in the future to allow PRODUCTION AUTOMATION to determine the credit situation.

This consent is not for a single inquiry and during the credit relationship with PRODUCTION AUTOMATION; PRODUCTION AUTOMATION reserves the rights to make additional further or different inquiries to redetermine the credit situation of the applicant. An extension of credit is not a guarantee of continuing credit extensions.

In consideration of any credit extended, the credit applicant agrees:

Payment shall be made to the above address of PRODUCTION AUTOMATION not later than thirty (30) days of the date shown on each individual invoice. PRODUCTION AUTOMATION may refuse to extend credit at any time for any reason, including for a pending shipment/order.

All accounts, or any part thereof, which are unpaid at the end of such thirty (30) day period shall be charged a finance charge at the rate of 1 ½ % per month but not greater than any applicable legal rate.

If any account or accounts are placed in the hands of a collection agency or an attorney, or collected through probate or bankruptcy proceedings, or through other legal procedures, the undersigned credit applicant agrees to pay all reasonable collection costs, including reasonable attorneys' fees.

The credit applicant affirms and represents that the goods sold and expected to be sold to it are solely for business or commercial purposes and not in whole or any part thereof for personal, household or family purposes. PRODUCTION AUTOMATION may rely on this representation for all sales.

The terms, conditions and representations in this credit application are binding on the original applicant, its successors, assigns, legal representatives, and trustees.

The person signing this application is authorized to do so and is authorized to bind the applicant to the terms, provisions, conditions and obligations herein.

Minnesota law applies, both substantive and procedural. Any suit brought to collect any sums or to retrieve any product or for any other claim arising out of the business relationship of the applicant and PRODUCTION AUTOMATION shall be brought exclusively in the circuit court for the State of Minnesota for the county of Hennepin.

DATED THIS* ______ day of ______, year _____

Company Name* (Print)

Signature*

Name* (Print)

Title* (Print)



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Production Automation Corporation gladly accepts checks, wire transfers, or ACH payments.

ACH payment is the preferred method of payment.

Wells Fargo Bank Wiring/ACH Instructions

PLEASE BE SURE TO SEND REMITTANCE TO:

ar@gotopac.com

Domestic Incoming Wires Only

ABA/Routing Number: 121000248 Account Number: 3150064659 Account Name: Production Automation Corporation Account Type: Checking

For ACH Transfers Only

Routing Number: 091000019 Account Number: 3150064659 Account Name: Production Automation Corporation Account Type: Checking

International Incoming Wires

Swift Number: WFBIUS6S Account Number: 3150064659 Account Name: Production Automation Corporation Account Type: Checking

Bank Contact Information:Bank Address:Chetna AtreyaWells Fargo BankPhone: 612-316-3344900 Wayzata Blvd. E.Fax: 612-316-0697Wayzata, MN 55391

Federal Tax ID: 41-1677014