



SEMPER/EXETER PAPER COMPANY, LLC
Specialty Papers and Paperboard

APPLICATION FOR CREDIT

NAME and ADDRESS on YOUR PURCHASE ORDER _____ **DATE** _____
 _____ **PHONE** _____
 _____ **FAX** _____

YEARS IN BUSINESS _____ **TRADE OR DBA NAME** _____

DIVISION OR SUBSIDIARY OF _____

CORPORATION _____ **PARTNERSHIP** _____ **SOLE PROPRIETORSHIP** _____

NAME OF PRINCIPAL AT LOCATION _____ **TITLE** _____

SALES TAX STATUS ___ **EXEMPT** ___ **NON-EXEMPT** (If exempt, please submit certificate)

Please list names, addresses, phone and **FAX** numbers of at least **THREE PAPER AND BOARD INDUSTRY SUPPLIERS** with whom you have done business and with whom you have established a credit line similar to that which you are requesting from Semper/Exeter Paper Company.

1. _____
2. _____
3. _____
4. _____

Applicant's signature attests financial responsibility, ability and willingness to pay invoices in accordance with the terms stated on invoice. Invoices unpaid by the net due date are subject to interest charges at 21% per annum. In the event that an account is placed for collection, applicant will be charged an additional 20% of unpaid balance as collection/legal fees.

The above information is for the purpose of obtaining credit and is warranted to be true. I/we hereby authorize Semper/Exeter Paper Company to investigate the references listed pertaining to our credit and financial responsibility.

FIRM NAME _____

SIGNATURE _____ **TITLE** _____

PLEASE FAX TO (859) 341-2065
Return to Semper/Exeter Paper Company, 2617 Legends Way, Crestview Hills, KY 41017
If you have any questions, please feel free to call Kristin Bain at (859) 341-7100.