

**LEON KOROL COMPANY**  
**CUSTOMER INFORMATION SHEET & CREDIT APPLICATION**  
2050 E. DEVON AVENUE, ELK GROVE VILLAGE, IL 60007  
PHONE: (847) 725-2200 FAX: (847) 956-1907

The information provided to Leon Korol Co. will be held as confidential.

**Legal Billing Name:** \_\_\_\_\_ **Ship to Name:** \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Resale #: \_\_\_\_\_

**Leon Korol Company must have a current resale certificate on file for all U.S. customers or sales tax will be charged.**

Federal Tax ID #: \_\_\_\_\_  
Year Started: \_\_\_\_\_ Duns # \_\_\_\_\_ Year End Date \_\_\_\_\_  
C Corporation: \_\_\_\_\_ S Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_ Sole Prop: \_\_\_\_\_ LLC: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ AP Phone #: \_\_\_\_\_  
AP Email Address: \_\_\_\_\_ Company Web Address: \_\_\_\_\_

**Bank Information**

Bank Name: \_\_\_\_\_ Bank Contact: \_\_\_\_\_  
Bank Address: \_\_\_\_\_ Bank Phone: \_\_\_\_\_  
Bank Acct#: \_\_\_\_\_ Bank Fax: \_\_\_\_\_

**Trade References**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**The Undersigned certifies that the information provided to Leon Korol Co. is complete and accurate and that the individual signing this application is authorized to do so. In the event of non-payment, the undersigned personally guarantees the debt to Leon Korol Co. and does hereby agree to pay all attorney fees and court costs in addition to the principal amount due. The Undersigned further agrees to pay interest on all past due balances at the lesser of the maximum legal rate or 1.5% per month. Leon Korol Company reserves the right to restrict, deny or withdraw credit at any time based upon its assessment of credit risk. In addition, the Leon Korol Company may immediately suspend credit due to delinquency in payment, insolvency or change in ownership.**

To my bank and suppliers,

Please provide Leon Korol Company with our credit or banking information for the purpose of establishing credit with them.

Authorized Signature \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_