



Founded 1955

Family Owned Business with 14 Locations
In North and South Carolina

Corporate Offices:

2100 Freedom Drive ♦ P.O. Box 31816 ♦ Charlotte, NC 28231
Phone: 704.374.0705 ♦ Fax: 704.377.6897
E-mail: Corp@DLPartsCo.com ♦ Website: www.DLPartsCo.com

CREDIT APPLICATION

PLEASE CHECK ONE:

- Home Appliance Technician
HVAC Technician/Contractor
Other

COMPANY OR CORPORATE INFORMATION:

Company \_\_\_\_\_ S.S# or Federal ID #(Owner) \_\_\_\_\_
Mailing/Bill to Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_
Shipping Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_
Telephone# ( ) \_\_\_\_\_ Fax # ( ) \_\_\_\_\_
E-mail address \_\_\_\_\_ Website: \_\_\_\_\_

RESPONSIBLE PARTY (Owner, CEO, President etc.)

Name \_\_\_\_\_ S.S# or Federal ID#(Owner) \_\_\_\_\_
Mailing Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_
Telephone# ( ) \_\_\_\_\_ Fax # ( ) \_\_\_\_\_ E-mail address \_\_\_\_\_

Please list all AUTHORIZED PURCHASERS for your company:

\_\_\_\_\_  
\_\_\_\_\_

Requested Credit Line: \$ \_\_\_\_\_

TRADE REFERENCES: Please list THREE (3) TRADE references. Must provide complete address, phone & fax numbers.

\*\* We prefer references for companies similar to us (other parts and equipment suppliers). \*\*

Must provide complete address and fax number.

1. Name \_\_\_\_\_ 3. Name \_\_\_\_\_
Address \_\_\_\_\_ Address \_\_\_\_\_
City-State-Zip \_\_\_\_\_ City-State-Zip \_\_\_\_\_
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_
Account # \_\_\_\_\_ E-mail: \_\_\_\_\_ Account # \_\_\_\_\_ E-mail: \_\_\_\_\_

2. Name \_\_\_\_\_
Address \_\_\_\_\_
City-State-Zip \_\_\_\_\_
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_
Account # \_\_\_\_\_ E-mail: \_\_\_\_\_

We CANNOT accept the following as TRADE references:
• Bank/Credit Cards
• Utility Companies
• Building Supply Companies (i.e. Lowes)
• Personal References
Please call if you have questions

Please Complete Both Pages of Application



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GENERAL INFORMATION:

Which D&L Branch will be your PRIMARY SOURCE OF SUPPLY?
Do you accept backorders? ( ) Yes ( ) No
Are you rated with Dun & Bradstreet? ( ) Yes ( ) No If yes, please list your D&B Number
Is your company currently sales tax-exempt? ( ) Yes ( ) No
If you are tax exempt a copy of your sales tax certificate must be included with this credit application.

Do you require purchase or work orders on each invoice? ( ) Yes ( ) No
Are you a CFC Certified Technician? ( ) Yes ( ) No
If you are certified, a copy of your certification must be included with this credit application.

TERMS OF SALE:

I hereby release the above information to D&L Parts Co. at 2100 Freedom Dr, Charlotte, NC, and authorize D&L use of all credit resources necessary to determine the worthiness of the above listed company. Additionally, I authorize D&L to periodically review my credit information as needed, as long as I maintain an open account. I understand D&L's terms are net 10th (all invoices are due on the 10th of the month following the date of purchase). Any payments received beyond these terms will be subject to a 1.5% finance charge, which are assessed on the 30th of the month past the due date (18% annual fee). Finance charges are accrued monthly.

I do hereby agree to reasonable collection fees and/or attorney fees in case of the default of my account. I am an authorized agent for the above listed Company and hereby agree to the above terms and conditions.

Print your name Title

Signature Date

PLEASE RETURN TO:

Attn: Credit Manager
D&L Parts Co., Inc.
P. O. Box 31816
Charlotte, NC 28231 Fax#: 704-377-6897

FOR D&L CORPORATE OFFICE USE ONLY:

ACCOUNT # SALES TAX CODE
BRANCH # SALESPERSON OR HOUSE #
AVAILABLE CREDIT LINE CFC CERTIFIED: ( ) YES ( ) NO
APPROVED BY DATE
DENIED BY DATE

Please Complete Both Pages of Application