



Accounts Receivable
 1 Grand Ave, Building 15
 San Luis Obispo, CA 93407
 Phone: (805) 756-1125
 Fax: (805) 756-5052
 Email: cpc-ar@calpoly.edu

CUSTOMER INFORMATION / CREDIT APPLICATION

Customer Information			
Full Legal Name:			
Operating Name (in full):			
Type of Business:	Years in Business:	TIN/EIN (if applicable):	
Mailing Address:			
City:	State:	Zip Code:	
Telephone:	Fax:	Website:	
Primary Contact:	Title:	E-mail:	
Banking Information			
Bank Name:	Phone:	Fax:	
Mailing Address:			
City:	State:	Zip Code:	
Bank Contact:	Phone:	Fax:	
Account #:	Account Type:		
Account #:	Account Type:		
Credit References			
	Reference 1	Reference 2	Reference 3
Company:			
Address:			
City/State/Zipcode:			
Account #:			
Contact:			
Phone/Fax:			
E-mail:			
Credit Terms			
<p>All invoices rendered by Cal Poly Corporation are to be paid within 30 days of the invoice date. Invoices not paid within these terms may be assessed interest each month at a rate of 1.5% (18% annually) until balance is paid in full. Failure to settle accounts within 90 days will be considered sufficient cause for immediate cancellation of sales and services, and the transfer of balance to a collection agency or the pursuit of a legal course of action.</p>			
Certification/Authorization			
<p>I, the undersigned, authorize Cal Poly Corporation to verify my credit worthiness with the references listed above and obtain a business credit report. I certify that the information provided is correct, and that I have read and understand the credit terms.</p>			
_____ Signature	_____ Title	_____ Date	