VIKING INC

Personal Account Application

Salesperson:	Location:	Date:

Applicant Information: ☐ New Account ☐ Credit Limit Increase

Name: (Last, First, MI)	Social Security Number:		
Mailing Address:	City	State	Zip
Delivery Address:	City	State	Zip

Home Phone:	Cell Phone:	Email:

Current Employer:	Occupation:	
Address:	Salary: (monthly)	Length of Employment:
Credit Limit Requested:	Purpose of Account: New Construction? Y or N	

Business References:

Name:	Phone:	Contact:
Address:	State:	Zip:
Name:	Phone:	Contact:
Address:	State:	Zip:

Bank Reference ☐ Checking ☐ Savings ☐ Loan ☐ Construction Loan

Name:	Phone:	Contact:
Address:	State:	Zip:

Invoice, Billing & Statement Options : please choose any combination that works for you

Invoices: Email ☐ Daily ☐ Weekly ☐ Monthly	Monthly Statements:
Print ☐ Weekly ☐ Monthly	☐ Emailed ☐ Printed ☐ Faxed
Fax ☐ Daily ☐ Weekly ☐ Monthly	

CUSTOMER AGREEMENT

I/We do hereby jointly and severally promise to pay all amounts on this account.

The undersigned understands that Viking Inc. requires that its statement be paid within thirty (30) days of the end of a billing cycle and that Viking,Inc will follow collection procedures. **A Late payment charge of one and one half percent (1 1/2) per month is charged on all invoices not paid within 30days** of the end of said billing cycle. Futhermore the undersigned agrees to pay all collection expenses incurred by Viking, Inc.

I understand that this application has been given for the purpose of obtaining credit. I understand that a credit report may be requested from one or more consumer reporting agencies in connection with application. If I request in writing, I will be informed whether a report was requested and the name and address of the consumer reporting agency that furnished the report. I am further aware that subsequent consumer reports may be requested or utilized in connection with any update, renewal or extension of credit, or if my account should be in arrears for more than thirty days. Viking, Inc is authorized to check my employment history and provide information to others about its credit experience with me.

_____	For Office Use
Signature Date	Customer #: _____
	Limit: _____
_____	Terms: _____
Signature Date	