Integral dx, Credit Application

Please complete the below information as complete as possible.
Integral dx's offer of credit will be based on data provided, as well
as consideration for annual spend and customer history with Integral dx.
(Please allow up to 45 days to process)

www.integraldx.com
121 N 1st. Street
Montevideo, MN 56265
(320) 435-0003

Legal Company Name:____

Federal EIN/Business Number/RFC:________________________

DBA Name:_______________________________ State/Prov. of formation:____________________

Telephone:__________________________ Bill To Address:____________________________

Fax:________________________________ Ship To Address:___________________________

Type of Organization: Corporation (Type) ____ Partnership ____LLC/LLP ____ Sole Proprietor _____

Date Business Started: ____________ Number of Employees:_______ Dunn & Bradstreet #:__________

Business Activity:____

Anticipated Annual Spend (USD): $________________

Authorized Persons

	NAME	TITLE	TELEPHONE	EMAIL
1.				
2.				
3.				

Trade References

Company Name: ______________________ Contact:_____________ Telephone:__________________

Address:_____________________________ Email:____

Company Name: ______________________ Contact:_____________ Telephone:__________________

Address:_____________________________ Email:____

Company Name: ______________________ Contact:_____________ Telephone:__________________

Address:_____________________________ Email:____

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BANK REFERENCE

Bank Name:______________________________________

Account #:_______________________________________

Contact/Officer:___________________________________

Address:____

Telephone:_______________________ Email:____

Billing Information:

Purchase Order Required? ☐ Yes ☐ No If No, email orders are acceptable & binding.

Send Invoices to (name):________________________ (phone):_____________________

(email address): ____

Payment Type? ☐ACH ☐Bank Wire ☐Paper Check (mail) ☐Other:______________________

Sales Tax Exempt? ☐ Yes ☐ No If yes, enter your tax exemption #_________________

Attach a copy of your Sales Tax Exemption Certificate (if not provided, tax will be included on invoices).

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be utilized to determine the amount and condition of the credit to be extended. Furthermore, I hereby authorize the financial institution listed in the Credit Application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. All statements are true and accurate to the best of my knowledge. I authorize Integral dx to make any and all inquiries necessary for action on this Credit Application. I fully understand and accept the terms and the conditions included and referenced on the following page(s) of this Application.

Signature:_____________________________ Title:_________________________________

Date:______________________ Company Name:____________________________________

Credit Application Terms and Conditions

By signing above, Applicant ("Customer") agrees to the following as well as all terms spelled out in Integral dx General Conditions of Sale Policy, applicable Warranty, and Parts Return Policy (the "Policies"). Where this Agreement conflicts with the Policies, the Policies shall supersede.

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Payment Terms:
Unless otherwise expressly provided, payment shall be due 30 days from the date of invoice. Past due accounts subject to prepay, or placed on hold until delinquent amount is paid; shipments may be suspended and/or credit revoked for past due accounts. Down payment invoices are due on receipt of invoice. Special requests and make-to-order items are non-cancellable.

Service Charge:
I hereby agree to pay you a service charge equal to 1.5% per month on all unpaid and past due invoice amounts, determined by invoice date plus payment terms, or a lesser amount per applicable law.

Transportation Terms:
If a shipping account is not provided, Integral dx will arrange transportation and invoice to customer. Shipping/freight expense may not be available until invoicing. Physical inventory location may require multiple shipments to fulfill an order. Shipping Terms: FOB Integral dx Dock.

Returns/Refunds/Claims:
Cost of non-defective returns are customer's expense and are subject to a restocking fee of $50.00, or 25% of return item(s) value, whichever is greater. Refunds will be in the form of store credit, which can be applied toward future invoices at customer's discretion. Claims for shortage or defect must be made in writing within fifteen (15) days of receipt as outlined in the General Conditions of Sale. Undisputed invoice amounts must be paid when due.

Taxes/Duties/Tariffs:
Customer is responsible for all applicable sales, use, GST/HST, VAT/IVA, duties, tariffs, and similar charges. Valid exemption certificates must be provided prior to shipment. Customer indemnifies Integral dx for improper exemption claims.

Transfer of Title:
Title to goods remains with Integral dx until paid in full. Customer grants Integral dx a purchase money security interest in goods sold and proceeds thereof until paid in full and authorizes Integral dx to file UCC-1, PPSA, or similar registrations without further signature.

Collection Costs:
Customer agrees to pay all costs of collection, including reasonable attorney's fees, court costs, filing fees, and collection agency fees.

Governing Law & Venue
This Agreement shall be governed by the laws of the State of Minnesota, without regard to conflict of law rules. Customer consents to the exclusive jurisdiction and venue in the state or federal courts located in Chippewa County, Minnesota, and waives objection to venue. Integral dx may pursue collection in Customer's jurisdiction if necessary.