

## METER Group, Inc. USA Credit Application and Agreement Form

## **Company Information**

Legal Company Name			
Phone	Fax	Fax	
Date Business Started	DUNS		
Street Address			
City	Prov/State	ZIP	
Personal Information (If company has be	en in business less than 1 year, complete the pers	onal information on owner/principal.)	
Company	, , , , , , , , , , , , , , , , , , ,		
Street Address			
City	Prov/State	ZIP	
Company Name  Accounts Payable Email  Invoicing Email  Banking Information (If company has been Name of Bank  Manager Name	en in business less than 1 year, complete the personal secount	onal information on owner/principal.)	
Street Address			
City	Prov/State	ZIP	
Trade References  1. Company Name	Contact Name		
Email	Phone	Fax	
2. Company Name	Contact Name		
Email	Phone	Fax	
3. Company Name	Contact Name		
Email	Phone	Fax	



## **METER**

## **Credit Terms**

By signing below, we are giving the bank authority to release applicable information to METER Group, Inc. USA. The information you have provided will remain confidential. This application is made with the understanding and agreement that METER's standard terms and conditions will apply, while provided, inter alia credit terms of net 30 days. If payment in full is not made within 30 days of the date invoiced, it is understood and agreed upon that an interest fee may be charged of 2% per month (24% annually) for all overdue invoices. Failure to pay invoices on time may result in a loss of credit terms with METER Group, Inc. USA. These provisions shall apply to all past, present, and future invoices submitted.

I the undersigned, represent myself as an authorized officer of the company seeking credit terms and have read and understand the above noted terms and conditions. Additionally, I agree to the terms and conditions noted above.

Signature	Date
Name/Title	
Please return completed application to accounts.receivable@metergroup.com.	