



Phone 888-959-0911
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Government Agency Purchasing Account Authorization Form

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This application is **ONLY** for Government agencies. All other inquires please call 888.959.0911. This form must be completed to be considered for credit. Both pages of this authorization must be signed and returned by fax or email. Please note that we will verify information with your organization as well as the references you have listed below.

Section 1 - Account Information

Name of Department: _____
Mailing / Billing Address: _____
City: _____ State: _____ Zip Code: _____
Phone #: _____ Fax #: _____
TIN # (if applicable): _____
Website: _____
Type of Organization (select one):
City: _____ County: _____ State: _____ Federal: _____
Volunteer Government Organization: _____ (volunteer organizations must provide TIN#)

Section 2 - Accounts Payable Contact Information

Accounts Payable Contact: _____
Phone #: _____ Ext: _____
AP Email: _____ Fax #: _____
Do you require vouchers from Sirennnet to make payment? Yes / No
select one
Do you pay from invoices? Yes / No
select one

Section 3 - Purchasing Contact Information

Authorized Purchaser 1: _____
Phone #: _____ Ext: _____
Email: _____ Fax #: _____
Authorized Purchaser 2: _____
Phone #: _____ Ext: _____
Email: _____ Fax #: _____
Authorized Purchaser 3: _____
Phone #: _____ Ext: _____
Email: _____ Fax #: _____
(attach additional page if more than three contacts and include all contact information listed)

Primary Shipping Address: _____
City: _____ State: _____ Zip Code: _____
Can this location accept the following shipments? Parcel: _____ Pallet: _____
(check all that apply for this address)

Secondary Shipping Address: _____
City: _____ State: _____ Zip Code: _____
Can this location accept the following shipments? Parcel: _____ Pallet: _____
(check all that apply for this address)

Section 3 - Purchasing Contact Information (continued)

Do you require Purchase Order numbers for each order submitted to Sirenet? Yes / No
(select one)

If yes, over what amount are PO numbers required? \$ _____

Will you accept a partial shipment? Yes / No
(select one)

What is your anticipated monthly purchase amount from Sirenet? \$ _____

Section 4 - Account References

Please provide three vendors as references for your account.

Vendor 1: _____
Contact: _____
Phone #: _____ Ext: _____
Email: _____ Fax #: _____
Length of History with this vendor: _____ Years _____ Months
Do you have a line of credit with this vendor? Yes / No
circle one

Vendor 2: _____
Contact: _____
Phone #: _____ Ext: _____
Email: _____ Fax #: _____
Length of History with this vendor: _____ Years _____ Months
Do you have a line of credit with this vendor? Yes / No
circle one

Vendor 3: _____
Contact: _____
Phone #: _____ Ext: _____
Email: _____ Fax #: _____
Length of History with this vendor: _____ Years _____ Months
Do you have a line of credit with this vendor? Yes / No
circle one

Section 5 - Certification

I certify that the statements above are true. I have received a copy of the McLoughlin & Eardley Group, Inc Credit Policy and I agree to comply with its terms. I authorize McLoughlin & Eardley Group, Inc. to obtain such additional information as you may require concerning this application, including contacting the three references listed above.

Name (Print)

Title

Signature

Date

For Internal Use Only:
Credit Extended: Net 30 Net 15 None
Customer #: _____
Approved By: _____
Date: _____

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Purchasing Account Policy

The Customer, _____, (as listed on page one of this application) has applied to McLoughlin & Eardley Group, Inc (MCLE) for a credit account. The Customer makes the following guarantees and agrees to the following provisions and terms when purchasing goods using their credit account:

1. All charges made on the account opened under this agreement in the buyer's name will be governed by the terms listed herein.
2. Customer is the type of government agency indicated on page one of this application.
3. Signee on both page one and two of this application is authorized to represent the customer/department listed.
4. Customer approves all authorized purchasing agents (as listed on page one of this application) to make purchases on this account, and the customer assumes the financial liabilities created by their purchases.
5. Before becoming a continuing (MCLE) terms customer, customer must complete the credit application.
6. (MCLE) reserves the right to establish a credit limit for all customers based on the information obtained from the credit application. Customers over their credit limit will be allowed to purchase on restricted terms. (See terms below).
7. Customer will notify (MCLE) in writing anytime there is a change of billing name, address, phone number, purchasing agents or any other information given on the original credit application.
8. (MCLE) reserves the right to request a periodic update of the account information. Accounts inactive for 12 months may be closed.
9. Terms are net 30 days with a finance charge of 1.5% per month on unpaid balances over 30 days old. If the balance is paid in full, no finance charges will be added. Payment is due within 30 days of the invoice date.
10. A \$20.00 handling fee will be charged for each check returned by the bank as unpayable plus any fees accrued by the bank. At this time, the account will be placed on a prepaid only basis until the returned check and any handling fees have been repaid.
11. Payments made to your account(s) will be applied in the following order: returned check fees, finance charges, principal balance.
12. All invoices are to be paid in full unless (MCLE) is notified of a disputed item within 15 days of the invoice date.
13. Credits for returned items will be issued only after items are inspected and determined to be in working order unless due to faulty workmanship or materials.
14. Customer agrees to pay the entire balance of invoices in full. If an invoice becomes past due, the customer agrees to pay reasonable attorney fees and court costs in the event suit is brought to recover any past due balances. Any recovery action would be subject to the Laws and Statutes of the State of Delaware.
15. (MCLE) reserves the right to send past due accounts to collection agencies. Customer agrees to pay all of the related collection fees.
16. The manufacturer holds all warranties.
17. The shipping carrier handles all damaged shipping claims.
18. No returns are allowed on custom or specialty orders.
19. All returns are subject to a restocking fee up to 25% of the price of the products returned. No returns will be allowed after 30 days.
20. All returns must have a return authorization number and prior approval before the return will be accepted.

CREDIT ACCOUNT DISCLOSURE STATEMENT

1. Accounts over the credit limit will be allowed to continue purchasing; however, each order will require prepayment at the time of the order.
2. On the first occurrence that the account goes (15) days past due, the account will be placed on credit hold.
3. Customers placed on credit hold may not be able to place new orders until the past due balance is paid in full.
4. Orders for accounts on credit hold will be placed on hold and will not ship until the account is up to date.
5. No finance charge will be imposed if you pay the full invoice balance by the invoice due date. Invoices not paid in full by the invoice due date will accrue finance charges of 1.5% per month on past due amounts until the invoice is paid in full.

 Name (Print)

 Title

 Signature

 Date