

TEXAS A&M UNIVERSITY

Texas A&M University Press

CREDIT APPLICATION

Company Name				
Billing Address				
City		State	Zip	Phone
Shipping Address (if	different)		0-02	
City		State	Zip	Phone
Contact			Title	
Type of Ownership	☐ Corporation	☐ Partners	☐ Individu	ıal
Years in Business Fax #		#		Federal ID #
Type of Account requ	as state applicants. Pl Note: Tax	ease send a copy of will be assessed u	of your tax exer unless exempt ce	on-Returnable mpt certificate or resale certificate. ertificate is included. References
(1.) Name		U		
Address				
Contact		_ Phone	Fax	
Account Number		_ Email Addres	SS	
(2.) Name				
Address				
Contact		_ Phone		Fax
Account Number		_ Email Addres	ss	
(3.) Name				
Address				
Contact			Fax	
Account Number		Email Address		

This form must be completed in order to extend credit and allow our customers to pay for their books at a later date.

PAST DUE INVOICES ARE SUBJECT TO BEING REPORTED TO THE STATE COMPTROLLER AND/OR A COLLECTION AGENCY.

A FEE WILL BE APPLIED TO ALL RETURNED CHECKS.

PRIVACY NOTICE:

State Law requires that you be informed of the following: (1) You are entitled to request to be informed about yourself collected by use of this form (with a few exceptions as provided by law); (2) You are entitled to receive and review the information; and (3) You are entitled to have the information corrected at no charge to you.

SIGNATURE TITLE DATE

