



**STERIS Corporation
CREDIT APPLICATION and AGREEMENT**

STERIS Corporation's payment terms are Net 30 Days from invoice date. All invoices are due on the due date regardless of required installation or service. If any sections of the application are not completed, credit allocation may be adversely affected.

A. APPLICANT				
Exact Legal Name of Applicant		State of Organization and Type of Business		Number of years/months in business
List all Business Name, trade names, DBAs, divisions, or subsidiaries				Contact person (Direct line/Ext)
Street Address		Mailing Address (if different from Street Address)		
Business Phone # (incl. area code)		Fax # (incl. area code)		e-Mail Address or Company Website
Ship To Address (Provide as much detail as possible, i.e., Lab #, dept., attention to, etc.)				
Bill To Address (if different from Ship To Address)			Will a leasing company be used as the Bill To for any orders? Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes", please explain.	
Has your company ever filed bankruptcy or have even been affiliated with a company that has filed bankruptcy? Yes <input type="checkbox"/> If "Yes", please provide detail.			Have you ever done business with STERIS Corporation before? Yes __ No __ If "Yes", please provide detail.	
Estimated Annual Sales		Amount of Credit Requested		Parent Company Name
B. BUSINESS INFORMATION (Check and Complete only the applicable item below)				
<input type="checkbox"/> Sole Proprietorship – (Name of Proprietor-location of principal residence)			SS#	
<input type="checkbox"/> Partnership – (Name of Partner(s), address business is conducted, and location of the Chief Executive Office)			SS#	
<input type="checkbox"/> Corporation/LLC/Limited Partnership			SS#	
<input type="checkbox"/> Business Trust or Other:				
Federal Tax # (if applicable)		Sales Tax Exempt: Yes _____ No _____ If "Yes", attach copy of certificate		
C. BUSINESS OWNERSHIP/PARENT COMPANY				
Owner(s) / Address			% Owned	How long?
D. BANKING INFORMATION				
Name of Bank/Branch		Account Number		Type of Account
Address		Phone #		Fax #
Bank Officer Contact		Contact's Direct line/Ext		
CREDIT LINE INFO				
Total credit lines available		Total amount drawn		Amt available for future draws
				Terms
Lead Bank(s)		Is applicant in compliance with all terms, conditions, and covenants? Yes <input type="checkbox"/> No <input type="checkbox"/> If "No", please explain.		
<i>I/We hereby authorize Bank named above to release information requested for the purpose of obtaining and/or reviewing credit.</i>				
E. TRADE REFERENCES				
Company Name	Contact Name/Title	Address	Phone #	Fax #
The preceding information is for the purpose of obtaining credit from STERIS Corporation and is warranted to be true. I/We hereby authorize STERIS Corporation to investigate all references and customary credit information sources including consumer credit reporting repositories regarding my/our credit and financial responsibility for the purpose of obtaining credit, and for periodic review for the purpose of maintaining the credit relationship.				

Date: _____	Most Recent	Prior
Current Assets		
Cash on hand and in banks		
Accounts Receivable		
Inventory		
Other Current Assets		
Fixed Assets		
TOTAL ASSETS		
Current Liabilities		
Accounts Payable		
Bank Loans		
Notes Payable		
Other Current Liabilities		
Long Term Liabilities		
TOTAL LIABILITIES		
NET WORTH		
ANNUAL SALES		
NET INCOME AFTER TAXES		

Note: 1. Full and most recent copies of Balance Sheet and P&L Statement may be required.
 2. Indicate Currency

The undersigned represents that these figures are taken from its books and records that said books and records are kept in accordance with generally-accepted accounting principles, and that these figures accurately reflect the financial condition of the undersigned company.

Open account terms are contingent upon creditworthy data received from information above. Letters of credit or cash-in-advance may be required.

Change of Ownership: I/We understand that we must notify STERIS Corporation in writing of any change in ownership, the name of the business, or structure of the business under which credit is established.

In the event of default, and if this account is turned over to an agency and/or attorney for collections, the undersigned agrees to pay all responsible attorney fees, and/or costs of collection whether or not suit is filed.

UCC1 Filing: To induce STERIS Corporation to extend credit, I/We hereby give STERIS Corporation a security interest in each item of equipment and other product purchased from STERIS Corporation (and any proceeds thereof) in order to secure payment when due of the purchase price for that item or product, costs and expenses payable by the undersigned in connection with the purchase and interest on such indebtedness. The security interest in each such item or product shall terminate when STERIS Corporation has received payment in full of the indebtedness for such item or product. I/We authorize STERIS Corporation to file one or more financing statements naming applicant as debtor covering equipment and other products purchased from time to time from STERIS Corporation. I/We further agree that the above grant/authorization may not be revoked without STERIS Corporation's written approval and that the foregoing does not obligate STERIS Corporation to grant or approve this application for credit or to otherwise extend credit to any of the undersigned at any time.

Applicant's signature, on behalf of the debtor, attests financial responsibility, ability, and willingness to pay in accordance with the above standard payment terms. Applicant, and the officer or other representative signing on behalf of applicant, hereby certify that they have carefully reviewed this credit application and it is true and complete.

Company Name: _____

Authorized Officer: _____

Name/Title

Signature

Date