

Issue Paper

DATE:

09/23/21

AGENDA ITEM (ACTION ITEM):

Consider/Approve submitting a credit application with EAP, Inc. for Kenton County School District construction projects.

APPLICABLE BOARD POLICY:

01.11 General Powers of the Board. The Board may borrow money on the credit of the Board.

HISTORY/BACKGROUND:

EAP, Inc. is requesting a credit application be submitted in order to accept District purchase orders for purchases to be made for Kenton County School District construction projects.

FISCAL/BUDGETARY IMPACT: None.

<u>RECOMMENDATION</u>:

Approval to Submit a credit application with EAP, Inc. for Kenton County School District construction projects.

<u>CONTACT PERSON</u>: Jennifer Weis-Smith

Principal/Administrator

District Administrato

Superintendent

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda. Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.

Credit Application



3930 Virginia Avenue Cincinnati, OH 45227 PH: 513-489-9494 FX: 513-489-6448

| EAP USE ONLY | | |
|-----------------|-------|--|
| Salesman: | | |
| Value: | \$ | |
| Credit Limit: | \$ | |
| Lien Protection | n: \$ | |

Company Information

| Last: | First: | Middle Initial: | Title: |
|-----------------------------------------------------------------------------------|--------------------------------|---------------------|-------------------------|
| Name of Business: Kenton County | Board of Education | | Social Security #: |
| Address: 1055 Eaton Dr. | | | Phone: (859) 344 - 8888 |
| City: Ft. Wright | State: KY ZI | ^{P:} 41017 | Fax: (859)344 - 1531 |
| Type of Business: K-12 Public Sc | hools | | Tax Authority (County): |
| Legal Form Under Which Business Operates: | Corporation D Partnership | Proprietorship | In Business Since: |
| Division/Subsidiary, Name of Parent Company: | | | Tax ID Number: |
| Tax Exempt:: YES 🗹 NO 🗌 (If YE | ES, attach Tax Exemption Form) | | In Business Since: |
| Accounting - Contact Name: Misty Jones, accounts. payable & Kenton, Kyschools. us | | Phone: | |
| Bill To - Addresss: 1055 Eaton Dr. | i j | 1 | Fax: |
| City: Ft. Wright | State: KY ZI | ^{2:} 41017 | Email: |

Bank References (See Attached)

| Institution Name: | Institution Name: | Institution Name: | |
|---------------------|--------------------|-------------------|---------------|
| Checking Account #: | Savings Account #: | Home Equity Loan: | Loan Balance: |
| Contact: | Contact: | Contact: | |
| Phone: | Phone: | Phone: | |

Trade References (Only Net 30 References Are Acceptable)

| Company Name | Phone Number | Fax Number |
|--------------|--------------|------------|
| 1) | | |
| 2) | | |
| 3) | | |
| 4) | | |

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 used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. If credit is extended by Environmental Air Products, it is our company's intention to pay any invoice within 30 days of invoice date. We understand that failure to do so will result in having our account placed on hold and Environmental Air Products may exercise their right to lien and/or place the open items with a third party for collections.

30-60 days

Signature

Title

The undersigned individual who is either a principal of the credit application or a sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation or the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.