



Apply for Net 30 Payment Terms

If your dental group or practice would like to purchase Zyris products using Net 30 payment terms, please complete the credit application form below. We will contact your references and respond to your request as soon as possible. If you have a question or need assistance with the credit application, please call us at 800-560-6066.

Submit completed form to certificates@zyris.com

*Indicates a Required Field

Practice Name* _____

Street address* _____

Street address 2 _____

City* _____ State/Region* _____

Postal Code* _____ Country _____

Practice Phone Number _____

Direct Contact Phone Number* _____

Fax Number _____

Website URL* _____

Your Email* _____

First name* _____ Last name* _____

What is your primary role in the practice? _____

How many years at this location? _____

Are you an existing Zyris Customer?* Yes No

What credit line amount are you requesting?* _____

We require three references, however, if you have a Schein or Patterson credit line, we only require that information.

Do you have a Schein or Patterson line of credit?* Yes No

Reference 1 - Vendor's Name (or Schein/Patterson):



Reference 1 - Account Number with Vendor (or Schein/Patterson Account#):

Reference 1 - Vendor's Contact Email (or Schein/Patterson email):

Reference 1 - Vendor's Phone# (or Schein/Patterson Phone#)*:

Reference 2 - Vendor's Name:

Reference 2 - Account Number with Vendor:

Reference 2 - Vendor's Contact Email:

Reference 2 - Vendor's Phone#:

Reference 3 - Vendor's Name:

Reference 3 - Account Number with Vendor:

Reference 3 - Vendor's Phone#:

Reference 3 - Vendor's Contact Email:

Accounts Payable Contact* _____

Accounts Payable Email* _____

Accounts Payable Phone* _____



Credit terms are 30 days from the date of invoice. Balance over 90 days will be sent to collections and reported to the three major credit bureaus that report credit scores: TransUnion, Experian and Equifax. The account will be placed on permanent pre-paid or credit card only payment status.

The applicant authorizes and releases all banks, persons, and companies listed on this application to furnish information and authorize the checking of credit. The undersigned agrees to pay all collection costs, court costs, and legal fees incurred to collect delinquent balances.

Please check the box below and enter your name below indicating your understanding of these terms.

*I understand and accept the above terms. I also understand that the submission of this form does not guarantee approval for Net 30 payment terms with Zyrus, Inc.

Signature* _____