Sales and Service

Business Credit Application

highradius

1. Business Information 2. Bank & Trade References 4. Review & Submit

Credit Authorization

PAYMENT TERMS - Subject to credit approval, payments are due thirty (30) 45 days from the date of the invoice. If the applicant does not have approved credit, as determined by Cummins Inc., payments are due in advance or at the time of the sale or s any rights Cummins Inc. has under the law and charges that Cummins Inc. may levy under statute, including attorneys' fees and costs of collection, Cummins Inc. may charge the applicant eighteen percent (18%) interest annually, or the maximum ar

STATEMENT POLICY - Statements and invoice copies can be accessed online at customerpayment.cummins.com.

CREDIT AUTHORIZATION -The applicant hereby applies for credit to Cummins Inc. In doing so, the applicant authorizes Cummins Inc. to investigate the information provided herein and to contact any bank, financial institution, credit reference, credit business with the applicant so as to obtain information concerning the applicant.

The applicant understands that any credit given will be subject to extension, continuation or discontinuation at the sole discretion of Cummins Inc.

If a sole proprietor or partnership: I recognize that my credit history may be a factor in the evaluation of the credit history and application for credit with Cummins Inc. I hereby give authorization to Cummins Inc. to obtain my consumer report periodi process affecting my company identified herein.

The terms of any credit given by Cummins Inc. to the applicant shall be set in Cummins Inc.'s sole discretion and may be changed by Cummins Inc. without notice to the applicant.

By signing this application on behalf of the applicant, I hereby represent that I am authorized to submit this application and bind the applicant and that at all the information contained herein, any attachments hereto, and any information provided in a terms and conditions as stated above.

Signature *

Save Signature | Clear

Name of Authorized Signatory * Willis Thompson

Title * Mayor

Email address of the signer * mayorwillisthompson@vicksburg.org

Date * 07/27/2026

If you experience issues with the digital signature please check that the browser being used is supported as per instructions on top of page 1 of the form. Otherwise for any issues completing the form please contact cssnacreditadmin@cummins.com

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Business Information

Legal Business Name *	City of Vicksburg
Date Business Established *	07/27/2026
Do you already have an account with Cummins? *	(●) Yes ( ) No
Existing Customer Number	140271
DUNS Number	
Type of product/services you are interested in purchasing *	Automotive (On-Highway) Vehicles: Parts and Service
Select the applicable vehicle category *	Heavy Duty Trucks (12L-15L vehicles)
Market Segment (Cummins internal usage) *	Heavy Duty Trucks
Cummins Sales Person Email	
Accounts Payable Contact First Name *	Tara
AP Last Name *	Brown
AP Email address *	tbrown@vicksburg.org
AP Telephone *	(601) 634-4550
Primary Region of Purchase *	United States
Select all regions you would purchase from *	☐ Texas and Oklahoma ☐ Puerto Rico ☐ Rest of USA
EIN	64-6001174
Estimated Annual Purchases *	100000
Requested Credit Limit *	100000

Address Line 1 *	1401 Walnut Street
Address Line 2	PO BOX 150
City *	Vicksburg
State *	Mississippi

If you have a US address, please enter a 5-digit numeric entry for the postal code. If you have an entry for the postal code. Do not include any special characters or spaces

Postal Code *	39180
Country *	United States
Telephone *	(601) 634-4550
Email *	apinvoices@vicksburg.org
Is Ship To information same as Business Information? *	No
Address Line 1 *	815 China Street
Address Line 2	
City *	Vicksburg
State *	Mississippi

If you have a US address, please enter a 5-digit numeric entry for the postal code. If you have an entry for the postal code. Do not include any special characters or spaces

Postal Code *	39180
Country *	United States
Has your company filed bankruptcy within the last 7 years? *	( ) Yes (●) No

Additional Business Information

Is Purchase Order Required? * (●) Yes ( ) No

Invoice Delivery Preference * Email

Email Address * apinvoices@vicksburg.org

Legal Status * ( ) Corporation ( ) Partnership ( ) Proprietorship ( ) LLC (●) Government Entity

Any current or past litigation against you or your company? * ( ) Yes (●) No

Do you have any liens filed against you? * ( ) Yes (●) No

Attachments

Are you tax exempt or do you have a resale certificate? * (●) Yes ( ) No

Upload Tax Exemption Certificate * *[Note Upload less than 10MB]*	City of Vicksburg Tax Exepmt Letter.pdf
Upload Financial Statements *[Note Upload less than 10MB]*	
Upload Other Attachments *[Note Upload less than 10MB]*	CITY of VICKSBURG W9.pdf
Upload Other Attachments 2 *[Note:Upload less than 10MB]*	
Upload Other Attachments 3 *[Note Upload less than 10MB]*	
Upload Other Attachments 4 *[Note Upload less than 10MB]*	
Upload Other Attachments 5 *[Note Upload less than*	