



**Commercial, Industrial, Residential
and Service Contractors**
855-296-8719

CREDIT APPLICATION

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COMPANY NAME _____ PHONE _____ FAX _____

STREET ADDRESS _____ CITY _____ STATE _____

ZIP _____ E-MAIL _____ CREDIT LINE SOUGHT _____

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) _____

COMPANY IS A: _____ CORPORATION _____ PARTNERSHIP _____ PROPRIETORSHIP _____ LLC _____ PLC

CORPORATE REGISTRATION NO. _____ VAT # _____

ANNUAL SALES _____ YEARS IN BUSINESS _____

NOTE: IF BUSINESS IS LESS THAN FIVE YEARS, YOU MUST COMPLETE PERSONAL GUARANTEE.

COMPANY DIRECTORS / OFFICERS / PRINCIPAL

NAME 1: _____ TITLE: _____

HOME ADDRESS: _____ PHONE: _____

NAME 2: _____ TITLE: _____

HOME ADDRESS: _____ PHONE: _____

NAME 3: _____ TITLE: _____

HOME ADDRESS: _____ PHONE: _____

BANKING DETAILS

BANK NAME: _____ ACCOUNT # _____

BRANCH ADDRESS: _____ CITY / STATE / ZIP _____

BANK CONTACT NAME: _____ PHONE # _____

TRADE REFERENCES

VENDOR 1: _____ CONTACT: _____

PAYMENT ADDRESS: _____ CITY / STATE / ZIP _____

PHONE: _____ FAX: _____ ACCOUNT #: _____

VENDOR 2: _____ CONTACT: _____

PAYMENT ADDRESS: _____ CITY / STATE / ZIP _____

PHONE: _____ FAX: _____ ACCOUNT #: _____

VENDOR 3: _____ CONTACT: _____

PAYMENT ADDRESS: _____ CITY / STATE / ZIP _____

PHONE: _____ FAX: _____ ACCOUNT #: _____

CONDITIONS (TERMS ARE NET 15 DAYS UPON CREDIT APPROVAL)

TERMS OF SALE, INCLUDING TERMS OF PAYMENT AND CHARGES, FOR EACH PURCHASE ARE AGREED TO BE THOSE SPECIFIED ON THE FACE OF EACH INVOICE. THE CUSTOMER HEREBY AGREES TO PAY ALL COSTS OF COLLECTION OR LEGAL FEES SHOULD SUCH ACTION BE NECESSARY DUE TO NON – PAYMENT. THE ABOVE INFORMANTION IS WILLINGLY SUPPLIED AND THE CREDITOR IS AUTHORIZED TO CONTACT THE ABOVE BANK AND TRADE REFERENCES IN ORDER TO ESTABLISH THE CREDIT WORTHINESS OF THE ABOVE NAMED COMPANY. IF THE APPLIANT IS NOT A CORPORATION, THE CREDITOR IS AUTHORIZED TO OBTAIN CREDIT REPORTS ON THE PROPRIETORS, PARTNERS OR PRINCIPALS. SHOULD A CREDIT AVAILBILITY BE GRANTED BY THE CREDITOR, ALL DECISIONS WITH THE RESPECT TO THE EXTENSION OR CONTINUATION SHALL BE IN THE SOLE DISCRETION OF THE CREDITOR. THE CREDITOR MAY TERMINATE ANY CREDIT AVAILABILITY WITHIN ITS SOLE DISCRETION.

DISPUTES: ANY DISPUTE OR CONTROVERSY ARISING FROM THIS AGREEMENT WILL BE RESOLVED BY ARBITRATION BY THE AMERICAN ARBITRATION ASSOCIATION. THE LANGUAGE OF THE ARBITRATION SHALL BE ENGLISH. THE NUMBER OF ARBITRATORS SHALL BE ONE. THE PARTIES AGREE THE AMERICAN ARBITRATION ASSOCIATION’S EXPEDITED RULES SHALL APPLY AND THEY WAIVE ALL RIGHT TO ANY HEARING REQUIRED WITNESS PRODUCTION. THE ARBITRATOR SHALL ISSUE AN AWARD BASED UPON THE WRITTEN DOCUMENTARY EVIDENCE SUPPLIED BY BOTH PARTIES. THE ARBITRATOR’S AWARD SHALL BE BINDING AND FINAL. THE LOSING PARTY SHALL PAY ALL ARBITRATION EXPENSES, INCLUDING ATTORNEY’S FEES.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM:

APPLICANT’S NAME _____ TITLE: _____

DATE: _____ APPLICANT’S SIGNATURE: _____

FOR PROPRIETORS, PARTNERS, S- CORPORATIONS IN THE US

I AUTHORIZE THE SELLER AND THEIR ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT ON MY CREDIT HISTORY.

DATE: _____ APPLICANT’S SIGNATURE: _____

PERSONAL GUARANTEE

THE UNDERSIGNED, FOR CONSIDERATION DO HEREBY INDIVIDUALLY AND PERSONALLY GUARANTEE THE FULL AND PROMPT PAYMENT OF ALL INDEBTEDNESS HERETOFOR OR HEREAFTER INCURRED BY THE ABOVE BUISNESS. THIS GUARANTEE SHALL NOT BE AFFECTED BY THE AMOUNT OF CREDIT EXTENDED OR ANY CHANGE IN THE FORM OF SAID INDEBTEDNESS. NOTICE OF THE ACCEPTANCE OF THIS GUARANTEE, EXTENSION OF CREDIT, MODIFICATION IN TERMS OF PAYMENT, AND ANY RIGHT OR DEMAND TO PROCEED AGAINST THE PRINCIPAL DEBTOR IS HEREBY WAIVED. THIS GUARANTEE MAY ONLY BE REVOKED BY WRITTEN NOTICE WHICH SHALL BE SENT TO THE CREDITOR’S CREDIT OFFICE BY CERTIFIED MAIL. ANY REVOCATION DOES NOT REVOKE THE OBLICATION OF THE GUARANTORS TO PROVIDE PAYMENT FOR INDEBTEDNESS INCURRED BY PRIOR TO THE REVOCATION. I AUTHORIZE THE SELLER AND THERE ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT AND TO CONTACT MY REFERENCES AS NECESSARY. AS GUARANTOR, I AM ALSO BOUND BY THE ABOVE ARBITRATION CLAUSE.

GUARANTOR’S NAME: _____ SIGNATURE: _____

HOME ADDRSS: _____ CITY / STATE / ZIP: _____

DATE: _____ TAX ID OR SS #: _____

GUARANTOR’S NAME: _____ SIGNATURE: _____

HOME ADDRSS: _____ CITY / STATE / ZIP: _____

DATE: _____ TAX ID OR SS #: _____