

If so, please explain_____

2412 Business Loop 70 E, Columbia, MO 65201

CREDIT APPLICATION

CHARGE □	CASH □
Internal Use Only	
DATE OPENED	
ACCT. NO	
TERRITORY MGR INITIALS	
BRANCH NUMBER	
DISTRIBUTED BY:	

PART 1	
Company Name (full legal name)	
Shipping Address	County
Billing Address	Phone
City, State & Zip Code	Fax
Email Address	
☐ Sole Proprietorship (must sign parts 1 & 2)	
Mr. □ Mrs. □ Ms. □ Miss □ (Must include middle init	ial)
Owner's Name	Social Security No
Spouse's Name	Social Security No
Home Address	Phone
City, State & Zip Code	Own □ Rent □
☐ Corporation ☐ LLC ☐ SUB S If less than one	year, complete proprietorship information.
State of Incorporation	Federal I.D. No
Officers- Pres	Home Phone
V.P	Home Phone
Treas	Home Phone
Sec'y	Home Phone
☐ Other	(both partners must sign Parts 1&2)
NamePartne	ership No./Social Security No
Address	Home Phone
Name	Social Security No
Address	Home Phone
Type of Business?	
How long have you been in business?	
Estimated Monthly Credit Requirements?	
Is this business a defendant in any suits or collection actions?_	

PART 1 CONTINUED

INVOICING:			
I would like my invoices			
☐ Emailed To		☐ Faxed To	
BANK REFERENCE:			
Bank Name		Phone	
Address			
Type of Account		Account No	
Banker's Name			
TRADE REFERENCES: (list a	t least three places where you	buy on open account and include fax number	rs.)
Name	Phone	Fax	
Address	Account No.		
City, State & Zip Code			
Name	Phone	Fax	
Address		Account No	
City, State & Zip Code			
Name	Phone	Fax	
Address		Account No.	
City, State & Zip Code			
Bankruptcy in the last seven years?	YES O NO O		
If yes, when	where	Did you receive a discharge? YES ☐ NO ☐	
LATE CHARGES The Applicant agrees to pay late cha TERMS	arges of 1.65% per month (19.8% yearly o	nay our invoices in accordance with the terms shown on each all invoices or amounts 30 days or more past due.	
the purpose of establishing a line of cred	lit. I/We hereby authorize Plumb Supply (ntained in this Application are true and complete and are mad Company to investigate the references listed pertaining to my t performance to credit reporting agencies and other credit in	y/our
I HAVE READ AND FULLY UNI	DERSTAND THE ABOVE. (Only	authorized persons may sign.)	
Company Na	me		
Χ			
Signature		Signature	
Title		Title	
Date		Date	

PART 2

PERSONAL CREDIT INFORMATION/GUARANTY

Must be completed and signed if proprietorship or partnership.

Former Home Addres	s	How Long ?			
City, State & Zip Code	9				
Previous Employer		How Long ?			
Address					
City, State & Zip Code	<u> </u>	Phone			
	nformation on any existing or rece card or other sources of Consume		nave had at a Bank,	Finance	
lame	City/State	Account No.	Mo. Payment	Balance	
ndividually and severally, absolutely, ne full and prompt payment, at Des Modern of the payment	uable consideration and in order to inductive irrevocable and unconditionally guarante Moines, Iowa, when due, of any and all and the east of any existing indebtedness or as a lal of any claims guaranteed by this instrumnotice and demand of any nature with research.	e to Plumb Supply Company nounts due and owing at the signed shall give written not ny transaction of commitment or extensions of time of spect hereto, and agree to guesentatives, successors and WELL AS THE TERM	r (the "Creditor"), its successive present time or that may ice of revocation by regisent previously undertaken payment thereof, without uarantee all amounts owe assigns.	essors and assigns hereafter be due stered mail. Such by you in reliance it further notice ed until such	
,					
Signati	ure	Signature			
Date		Date			
·					

This application will only be considered complete when signed by duly authorized individual(s).

REV 10/18

FOLD ALONG DOTTED LINE AND STAPLE AT BOTTOM

PLACE

STAMP

HERE

Plumb Supply Company 2412 Business Loop 70 E Columbia, MO 65201