

APPLICATION FOR CREDIT

email completed application to: accounting@perrymillsupply.com

COMPANY INFORMATION

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Shipping Address (if different): _____

City: _____ State: _____ Zip Code: _____

Principle Contact: _____ Payables Contact: _____

Phone: _____ Phone: _____

Fax: _____ Fax: _____

Email: _____ Email: _____

Corporation Partnership Proprietorship Individual

Date Incorporated or Business Started: _____

BANKING INFORMATION

Bank Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact: _____

Email: _____ Phone: _____

Account Type: _____ Account No: _____

CREDIT REFERENCES

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Do you agree to our terms of Net 30 Days? _____ to notify us if you become unable to pay on time? _____

Are cash sales permitted until credit approved? _____

Are purchase orders required? _____

Signature **Print** **Title** **Date**