

PLUMBERS WHOLESALE SUPPLY CO.
24377 W. EIGHT MILE RD.
DETROIT, MI 48219
PH: (313) 537-5400 FAX: (313) 537-8550

ATLAS PLUMBING SUPPLY CO.
3439 GRATIOT AVE.
DETROIT, MI 48207
PH: (313) 579-2700 FAX: (313) 579-3301

COMMERICAL CREDIT APLPLICATION

Full Business name: _____

Business Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax Number:** _____

E-Mail Address: _____ **Company Wed Address:** _____

Business is a ☐ **Sole Proprietorship** ☐ **Partnership** ☐ **Corporation** **How Long in Business?** _____

PLEASE LIST THE NAMES AND ADDRESSES OF PRINCIPAL STOCKHOLDERS OR OWNERS:

<u>Name of Owner or Officer</u>	<u>Title</u>	<u>Home Address</u>	<u>Phone</u>	<u>Soc Sec No.</u>
_____	_____	_____	_____	_____

Name of Person Responsible for Paying Invoices: _____

Title: _____ **Phone:** _____

Invoice Delivery: ☐ **E-mail** ☐ **Fax** ☐ **Mail** **Statement Delivery:** ☐ **E-mail** ☐ **Fax** ☐ **Mail** ☐

Accounts Payable E-mail Address/Fax Number: _____

<u>Bank Name</u>	<u>City</u>	<u>Phone</u>	<u>Officer</u>
_____	_____	_____	_____

Please Provide Three Trade References:

<u>Company Name</u>	<u>City/State</u>	<u>Phone Number</u>	<u>Fax Number</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Your Estimated Annual Sales: _____ **Estimated Monthly Purchases:** _____

For faster processing of your application, please fill out ALL addresses and account numbers where required. Your assistance will be greatly appreciated. Please enclose latest year-end financial statement and intern statements if available.

A finance charge of 2% per month, 24 per annual, or as otherwise provided by the laws of your state. As consideration of the extension of credit, the undersigned understands and agrees that the failure to send written notice of contesting any invoices within 5 days of the invoice date, shall constitute an acceptance of the invoices and the undersigned waives any and all decreases to the amount contained therein.

Signed: X _____ **Title:** _____ **Date:** _____

Personal Guarantee

To induce Plumbers Wholesale Supply & Atlas Plumbing Supply to sell goods on credit to the above company, the undersigned personally guarantees and agrees to pay when due, or upon demand, the full amount of any indebtedness owing to Plumbers Wholesale Supply Company & Atlas Plumbing Supply in connection with such sales on credit plus reasonable attorney fees and collection cost.

Signed: X _____ **Drivers License #:** _____

MUST ALSO PROVIDE COPY OF DRIVER LICENSE

For Office Use Only: **Credit Limit: \$** _____ **Date:** _____

Comments: _____