CREDIT APPLICATION

dba Name _____ Legal Name_____

Billing Address _____Shipping Address_____

City/St/Zip_____   City/St/Zip_____

Telephone _____ Fax _____Company Type- Corp _____Partnership _____LLC_____

Type of Business (SIC) _____Years of Operation _____Federal Tax ID Number_____

Buyer Contact _____Phone _____Email _____

Purchase Orders Required? ☐Y ☐N

A/P Contact _____ Phone_____Email_____

Would you like invoices emailed? ☐Y ☐N Email address_____

Sales Tax Exempt # _____ (Tax certificate required).   DUNS #_____

Owners, Principals, Officers

Name/Title_____ Address_____ Phone_____ SS#_____

Name/Title_____ Address_____ Phone_____ SS#_____

Trade References: Name, Email Address, & Phone

1. _____

2. _____

3. _____

Bank Details: Name _____ Acct#_____Contact _____

Address _____ Phone #_____

Maximum Credit Required from Metal Supermarkets _____

Terms of payment are net 30 days from date of invoice. Outstanding balances may be subject to 1.5% per month service charge. The undersigned authorizes and releases banks, persons and companies listed on this application, to furnish information and authorizes the checking of credit. The undersigned agrees to pay all collection costs, court costs and legal fees incurred to collect delinquent balances. The undersigned certifies that the information furnished in this application is true and correct, and has read and agreed to all the terms and conditions of this agreement.

Authorized Signature _____ Date _____

Print name and title _____

Continuing Personal Guaranty
In consideration for credit extended, the undersigned contracts and agrees to the following. This Guaranty will secure Seller and Guarantor, in full, the payment of any and all obligations owing to the Seller by said applicant. The undersigned Guarantor expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payments, any notice of default by the company seeking credit and all other notices of the guarantor might be entitled to. Revocation of this guaranty shall be in writing and delivered by certified mail.

Signature_____Date_____

Address_____Phone_____