



New Customer Application for Credit

This credit application is for in-store purchases only. For national account purchases through Metal Supermarkets Pro+, please [click here](#) to get redirected to the other form.

The Convenience Stores For Metal®

The undersigned for the purposes of obtaining credit now and hereafter, herewith submit to Metal Supermarkets for their reliance thereon the following presentations which are complete, accurate and truthful. In the event of any substantial change in the following representations, the undersigned, promises to immediately notify Metal Supermarkets.

Business Name: _____ Date: _____

Phone Number: (____) _____ - _____ Fax Number: (____) _____ - _____

Mailing Address:

Shipping Address:

P.O. Box _____

Suite # _____

Street _____

Street _____

City _____

City _____

State _____ Zip _____

State _____ Zip _____

Federal I.D No. _____ - _____ Reseller Permit # / Exempt # _____ (Attach copy)

Company Contacts:

Purchasing: _____ Phone: _____ Email: _____

Accounts Payable: _____ Phone: _____ Email: _____

Purchase Orders Required? ☐ YES ☐ NO

Would you like invoices emailed? Email Address: _____

TRADE REFERENCES: (or attach own list)

1) _____ Phone: _____ Email: _____

2) _____ Phone: _____ Email: _____

3) _____ Phone: _____ Email: _____

Contact Person Requesting Credit (Please Print) _____

The undersigned agrees to pay their account within the terms of sale as stated upon each invoice. If any amounts due are not paid within said period, purchase agrees to pay a service charge of 1% per month (12% per annum). In any action to collect delinquent debt to Metal Supermarkets, the undersigned hereby agrees to pay all costs and expenses, including reasonable attorneys fees plus all court and attendant collection costs.

Authorized Signature: _____

Title: _____

Name (Please Print) _____

**THIS CREDIT APPLICATION MUST BE SIGNED BY THE APPLICANT AND
SUBMITTED WITH A SIGNED W-9 IN ORDER TO GRANT CREDIT**