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APPLICATION FOR CREDIT

Firm Name _____

Address 1 _____

Address 2 _____

City, Town _____ State _____ Zip _____

Phone # _____ Fax # _____

e-mail _____ Resale Tax Id# _____

Ownership Information

Name Of Principal _____ Soc. Sec # _____

Home Address _____ No. Yrs Here _____

Credit References

Table with 5 columns: Name, Address, Acct #, Phone #, Fax #. Contains 3 numbered rows for credit references.

Bank Reference

Table with 4 columns: Name, Address, Phone #, Account #. Contains 1 numbered row for bank reference.

Amount Of Credit Requested \$ _____

If Your Account Becomes Delinquent (60 Days Or More Past Due) And We Place The Account With An Attorney, Buyer Agrees To Pay All Collection Costs Including Attorneys And/Or Collection Fees, And Court Costs.

I/We Agree To The Terms And Conditions, And Acknowledge Receipt Of A Copy Of This Application.

Signature

(Corporate Officer, Owner, Agent) Date _____

Specializing in Quality Light Bulbs & Tubes, Ballast, Light Fixtures and Parts
IF IT LIGHTS UP - CALL US