



Account number:
Credit line:

# CREDIT APPLICATION

PLEASE PRINT

BUSINESS NAME								
ADDRESS				CITY		STATE		ZIP CODE
PHONE NUMBER					FAX NUMBER			
FEDERAL ID or SOCIAL SECURITY NUMBER					TAX EXEMPT NUMBER			
CORPORATION		PARTNERSHIP		PROPRIETORSHIP		INCORPORATED:	YEAR	STATE

OWNERS, OFFICERS OR PARTNERS	ADDRESS	TELEPHONE

**TRADE REFERENCES**

NAME	ADDRESS	PHONE	FAX

**BANK INFORMATION**

NAME	ADDRESS	PHONE	FAX

<b>CREDIT REQUESTED:</b>
--------------------------

The above information is for the purpose of obtaining credit and is warranted to be true. I/we authorize the persons of the firm to whom this application is made to investigate the references listed pertaining to our credit worthiness. I/we agree to the terms of sale and returns policy of Seekonk Supply Inc. I/we hereby guarantee the full and prompt payment of any indebtedness of applicant, including service charges on open balances at 1.5% per month, costs of collection including attorneys' fees in an amount equal to 35% of all open balances and all other related costs and expenses of collection, which amount I/we deem reasonable. Upon any amount becoming past due, Seekonk Supply Inc. may seek payment of same from the undersigned, his/her heirs, administrators, and representatives without prior notice or demand, and without proceeding against applicant first. Applicant's signature attests financial responsibility and willingness to pay our invoices in accordance with the terms stated herein. In the event that Seekonk Supply Inc. employs an attorney or collection agency to collect any amount due from applicant, the applicant shall be responsible for all costs of collections including (without limitation) attorney's fees, court costs, and any contingency fees paid to a collection agent.

**PRINT NAME:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_