



CREDIT APPLICATION

COMPANY INFORMATION							
Company Name							
Owner (s) Name (s)				Accounts Payable Contact			
Company Type		Sole Ownership		Partnership		Corporation	
Business Address							
Mailing Address							
Phone				Fax			
Email							
Purchase Order Required		Yes		No			
SALES TAX							
Are your purchases exempt from sales tax in the state of delivery?		Yes		No			
If yes, provide exemptions/resale certificate with this application. Sales tax will be charged for all deliveries until certificate is on file with JL Sanitary & Supply Co., Inc.							
REFERENCES							
Bank Name				Account Number			
Address							
Phone				Fax			
Contact							
Vendor #1				Account Number			
Address							
Phone				Fax			
Contact							
Vendor #2				Account Number			
Address							
Phone				Fax			
Contact							
Vendor #3				Account Number			
Address							
Phone				Fax			
Contact							

TERMS OF AGREEMENT

Net 30 days. Amounts past due are subject to 1 1/2% per month service charge (18% annually). 15 percent additional on amount of principal and interest unpaid if placed in the hands of an attorney or collector for collection.

Signature _____ Printed Name _____

PERSONAL GUARANTY

For valuable consideration, the undersigned hereby personally and unconditionally guarantees to pay all indebtedness and liability incurred by the Applicant to JL Sanitary & Supply Co., Inc. This is a continuing guaranty and shall continue as long as credit is extended.

THE UNDERSIGNED HEREBY CERTIFIES THAT THE APPLICANT'S FINANCIAL STATEMENT ATTACHED HERETO IS TRUE AND CORRECT IN ALL RESPECTS.

Signature _____ Date _____ / _____ / _____
 Printed Name _____