



FAX: 734-459-4139
PHONE: 734-459-4192
WEB: EJOISTDISTRIBUTION.COM

CREDIT APPLICATION

Company Information

Company Name

Trade Name

Street

City, State, Zip

Phone

Fax

Email

Lease/Own

At Present Location Since

Federal Tax Identification Number

Sales Tax Exemption Certificate

Motor Vehicle Repair Facility registration

Business License

Owners Information

Owner Print Name

Owner Print Name

Social Security

Social Security

Phone

Fax

Phone

Fax

Email

Email

Bank Information

Bank Name

Account Number

Address

City, State, Zip

Contact Name

Phone

Fax

Trade References

Company Name

Company Name

Phone

Phone

Fax

Fax

Credit Amount

Credit Amount

Date Account Opened

Date Account Opened

Company Name

Company Name

Phone

Phone

Fax

Fax

Credit Amount

Credit Amount

Date Account Opened

Date Account Opened

Terms and Conditions

All accounts are COD until a credit application has been approved. If any indebtedness incurred pursuant to this request for credit is not paid in full when due, the undersigned agrees to pay all costs of collection, including reasonable attorney fees. Any balance remaining unpaid shall bear interest at the lesser rate of 1.5% per month. Or the maximum rate permitted by applicable law, until paid in full.

Acceptance

Signing this agreement indicates your acceptance to the terms and conditions as stated. In addition, you authorize eJoist Distribution to make any and all inquiries necessary to process this credit application.

Authorized Signer Name

Title

Signature

Date