

7913-A Kincannon Place Lorton VA 22079
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E: accounting@globalsupplyusa.com

## CREDIT APPLICATION

Company Name		Phone	
DBA		Fax	_
Street Address			_
City, State, Zip Code		E-Mail	_
Business Type: Sole Proprietor	Partnership	Federal Tax ID/EIN:  Years in	
Corporation	Othe <u>r:</u>	Business:	
Applicant(s)Information			
Name /Title	Phone	E-Mail	_
Accounts Payable or Contact	<b>Person</b> (i.e., rega	rding invoices and payments)	
Name /Title	Phone	E-Mail	
•		-	
Trade References			
Company Name Street Address		Contact Phone /Fax	
City, State, Zip Code			
City, State, Zip Code		E-Mail	
Company Name		Contact	
Street Address		Phone /Fax	
City, State, Zip Code		E-Mail	
Company Name		Contact	
Street Address		Phone /Fax	
City, State, Zip Code		E-Mail	
Bank Reference			
Institution Name		Account No.	
Address		Phone /Fax	
billing. In the event this account become court costs. Furthermore, the undersign	es delinquent and is tur ed agrees to notify <b>Glo</b> able for all purchases s	ripply LLC and agree that all invoices are due within thirty (30) days rined over to an attorney for collection, I agree to pay all reasonable obal Contractor Supply LLC, by certified mail of any pending changehould the undersigned fail to comply with said notification. I agree to the contractor of	attorney fees and ge of ownership of
		Credit Limit Desired:	
I certify the above information to be a	ccurate and true.		
Signature		Date	_
Print Name & Title			_
Personal Guaranty			
I, the undersigned, jointly and severally indebtedness, obligations, and liabilities	of Applicant to Global	rantee to <b>Global Contractor Supply LLC</b> the full and prompt paym <b>Contractor Supply LLC</b> . Guarantor further agrees to pay any and all sums due not otherwise paid by Applicant.  Date	
Print Name & Signature			_