

BUSINESS CHARGE APPLICATION



CAPITAL CITY ACE HARDWARE
3215 TAYLOR ROAD
MONTGOMERY, AL 36116
334-239-9500
334-329-7104

APPLICATION INFORMATION

All information will remain confidential.

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Years in Business _____

Person Making Application _____

email address _____

TYPE OF OWNERSHIP

___ Corporation ___ Partnership ___ Sole Proprietorship

Federal ID# _____

or

Social Security # _____

___ Tax Exempt (attach copy of Federal exemption letter)

___ Resale (attach copy of Certificate of Resale)

OWNERSHIP:

Name(s) of Officer(s) and Title _____ Complete Address, City, ST, Zip _____ Phone # _____

Name(s) of Officer(s) and Title _____ Complete Address, City, ST, Zip _____ Phone # _____

FINANCIAL:

Bank _____ Bank Address _____ Zip _____ Phone # _____

Bank Officer or Department _____ Phone # _____

BUSINESS REFERENCES:

Business Name _____ Complete Address, City, ST, Zip _____ Phone# _____ Fax# _____

Business Name _____ Complete Address, City, ST, Zip _____ Phone# _____ Fax# _____

Business Name _____ Complete Address, City, ST, Zip _____ Phone# _____ Fax# _____

Do You Require a Purchase Order? YES NO

No restrictions to charge will be placed on this account unless a specific list of authorized users is provided. Any changes to the list must be submitted in writing.

I/We certify that all the information on this form is correct. I/we fully understand your credit terms and agree to the proper payment in consideration of extended credit. Furthermore, I/we approve of your obtaining information from the above references and a credit report on my company or if not a corporation, a report on me/us personally. If you update, renew, or extend my line of credit, you may request a new report without notice.

Name (Printed) _____

Signature _____

Title _____

DATE _____

Please Do Not Write In Spaces Below--For Ace Hardware Store Use Only

VERIFICATION:

References Checked by: _____

Approved _____ Declined _____

References Comments: _____

By: _____

Date: _____

Please See Reverse Side for Terms & Conditions Of Business Charge Accounts