



APPLICATION FOR OPEN ACCOUNT



431 N.PLEASANTBURG DR.-29607- P O BOX 2368-29602- GREENVILLE, SC-(864)271-7111-FAX (864)-370-4462

COMPANY NAME \_\_\_\_\_
PO BOX \_\_\_\_\_ SHIP TO \_\_\_\_\_
CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ CITY \_\_\_\_\_ COUNTY \_\_\_\_\_
STATE \_\_\_\_\_ ZIP \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_
SOCIAL SECURITY NO. \_\_\_\_\_ SALES TAX \_\_\_\_\_
FEDERAL ID \_\_\_\_\_ EXEMPTION NO. \_\_\_\_\_
PHONE \_\_\_\_\_ FAX \_\_\_\_\_
NAME OF PRINCIPAL(S) IN COMPANY \_\_\_\_\_
BUYER \_\_\_\_\_ ACCOUNTS PAYABLE CONTACT \_\_\_\_\_
BUYER EMAIL \_\_\_\_\_ ACCOUNTS PAYABLE EMAIL \_\_\_\_\_
TYPE OF BUSINESS \_\_\_\_\_ DATE BUSINESS STARTED \_\_\_\_\_
INDIVIDUAL, CORP. OR PARTNERSHIP \_\_\_\_\_ PRICES ON SALES ORDERS: YES \_\_\_\_\_ NO \_\_\_\_\_
BANK/ADDRESS \_\_\_\_\_ PO REQUIRED: YES \_\_\_\_\_ NO \_\_\_\_\_

Table with 2 columns and 4 rows for TRADE REFERENCES. Header: TRADE REFERENCES: PLEASE COMPLETE ALL LINES OF INFORMATION. Columns: NAME, PHONE NO., FAX NO., CITY, STATE, ZIP.

APPROXIMATE ANTICIPATED PURCHASES PER MONTH \_\_\_\_\_

IF REQUIRED, MAY WE HAVE A COPY OF YOUR FINACIAL STATEMENT: YES \_\_\_\_\_ NO \_\_\_\_\_

\*SERVICES CHARGE OF 1 1/2% WILL BE CHARGED ON ALL PAST DUE INVOICES. \*WE AGREE TO ADHERE TO THESE TERMS.
\*MERCHANDISE NOT TO BE RETURNED WITHOUT WRITTEN PERMISSION. \*A PERSONAL GUARANTY MAY BE REQUIRED

WE UNDERSTAND AND AGREE TO MEET HOLDER'S TERMS OF SALE TO PAY SERVICE CHARGES ASSESSED AND TO PAY REASONABLE ATTORNEY FEES AND COST OF COLLECTION IN THE EVENT OF DEFAULT.

Signature-By an Officer \_\_\_\_\_ Title \_\_\_\_\_

The undersigned individual who is either a principal of the credit applicant or the sole proprietor of the credit applicant, recognizes that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process. Controlling law of this agreement shall be South Carolina law. Both parties additionally agree any further litigation shall be in the state of South Carolina in Greenville County.

DATE \_\_\_\_\_

Signature- By a Principal \_\_\_\_\_ Title \_\_\_\_\_