Credit Application for Patrician Marble Company

3333 W. Osborn Rd. Phoenix, AZ 85017

(602) 269-7154 Office - (602) 269-7745 Fax

PLEASE RETURN THIS CREDIT APPLICATION TO YOUR SALES REPRESENTATIVE

Company Name _____

Street Address _____ Fed I.D. # _____

Billing Address _____ Tax Resale # _____

City_____ State_____ Zip_____ Phone (___) _____

Fax # _____

Check one: ___ Proprietorship ___ Partnership ___ General ___ Limited

___ Corporation: State of Incorporation_____ Date Incorporated_____

If a subsidiary or division, name and location of parent company:_____

Name and location of affiliated companies: _____

Have you ever filed personal or corporate bankruptcy? _____ When? _____

Under what name? _____

Purchase Order Required ___ Yes ___ No If Yes, who is authorized to sign _____

BANKING: Business acct. held at _____ Acct. No. _____

Personal acct. held at _____ Acct. No. _____

OWNER AND/OR OFFICER INFORMATION

Name_____ Title_____ Name_____ Title_____

Address_____ Address_____

_____ Zip_____ _____ Zip _____

Phone_____ S.S. #_____ Phone_____ S.S. #_____

Name_____ Title_____ Name_____ Title_____

Address_____ Address_____

_____ Zip_____ _____ Zip _____

Phone_____ S.S. #_____ Phone_____ S.S. #_____

TRADE REFERENCES WHERE CREDIT NOW EXTENDED

SUPPLIERS ONLY PLEASE

	Name	Address	City	State	Area Code	Telephone
1.					(_____)	
2.					(_____)	
3.					(_____)	
4.					(_____)	

For the purpose of obtaining merchandise from PATRICIAN MARBLE COMPANY billing acording to the hereafter called Patrician, the undersigned make the following statement. We hereby agree to pay all terms printed on each invoice and to make all payments to the office of Patrician Marble Company, 3333 W. Osborn Road, Phoenix, Arizona 85017. We understand that if payment is not made when due interest shall accrue on the outstanding balance at the rate of 1-1/2% per month (18.0% APR) from the date due until paid.

In the event that it is necessary for Patrician to use legal action and/or the services of a collection agency to collect our account, we agree to pay all reasonable cost incurred including attorney fees and court cost. We further agree that if any legal action be brought in connection with this agreement, that such action be brought in connection with this agreement, that such action be brought in Maricopa County, Arizona.

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to verify my credit and employment history and to answer questions regarding your credit experience with me.

PLEASE ATTACH YOUR MOST RECENT AUDITED FINANCIAL STATEMENT TO THIS APPLICATION.
CREDIT CANNOT BE EXTENDED UNTIL RECEIVED!

Signed At: City_____ State_____this_____Day of _____ 20_____

Company Name _____ By _____

Title _____

ALL PRINCIPALS MUST COMPLETE REVERSE SIDE