



8326 Nichols Ave. Ext. Fairhope, AL 36532
Fairhope (251) 928-7334 - Spanish Fort (251) 626-7339

Credit Application

General Information:

Type of Business (Circle One): Corporation / Partnership / Proprietorship

Name of Business: _____

Office Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Fax Number:** _____

Owner/President: _____

General Manager: _____

Partners (if any): _____

Trade Information:

Note: Please only list those vendors that sell to you on open accounts.

Name: _____ **Account Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Fax Number:** _____

Name: _____ **Account Number:** _____

Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Phone Number: _____ **Fax Number:** _____

Name: _____ **Account Number:** _____

Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Phone Number: _____ **Fax Number:** _____

Vendor Information:

Does your business require purchase orders (circle one): Yes – No

List name(s) of person(s) authorized to request service for your business.

Name: _____ **Title:** _____

Name: _____ **Title:** _____

Name: _____ **Title:** _____

Name: _____ **Title:** _____

Name: _____ **Title:** _____

Terms and Conditions:

- 1. All invoices are due on the 15th of the following month following purchase of service.**
- 2. All invoices past due after thirty (30) days shall accrue a finance charge of 1 ½ % per month (18% per annum) on the past due amount.**
- 3. In the event of non-payment, the customer agrees to pay all reasonable costs in securing full payment, including, but not limited to collection and attorney fees, including all court costs.**

I have read and understand the above terms and conditions. I hereby certify that the business/corporation listed herein is licensed and authorized to conduct business within the State of Alabama.

Signature: _____ **Title:** _____

Home Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Fax Number:** _____

Credit Approved by: _____ **Date:** _____