



# APPLICATION FOR CREDIT

## **ROBINSON PLUMBING & HEATING SUPPLY CO., INC.**

195 BROADWAY • FALL RIVER, MA • (508) 675-7433

PLEASE COMPLETE

Please Print or Type

**REMIT TO: P.O.BOX 2071, FALL RIVER, MA 02722**

DATE: \_\_\_\_\_ S.S. #: \_\_\_\_\_ TEL. #: \_\_\_\_\_ FAX #: \_\_\_\_\_

TRADE NAME: \_\_\_\_\_ FED. I.D. #: \_\_\_\_\_

BUSINESS ADDRESS & ZIP CODE + 4 # BAR CODE: \_\_\_\_\_

DELIVERY ADDRESS (If different from above): \_\_\_\_\_

NAME: \_\_\_\_\_ DATE OF BIRTH.: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HOME ADDRESS, ZIP CODE & TELEPHONE # \_\_\_\_\_

HOW MANY YEARS IN BUSINESS: \_\_\_\_\_ NO. EMPLOYEES: \_\_\_\_\_ IF NEW VENTURE NAME OF FORMER EMPLOYER: \_\_\_\_\_

ESTIMATE ANNUAL SALES: \_\_\_\_\_ AMOUNT OF CREDIT REQUESTED: \_\_\_\_\_ LICENSE # & TYPE: \_\_\_\_\_

CORPORATION: \_\_\_\_\_ PARTNERSHIP: \_\_\_\_\_ INDIVIDUAL: \_\_\_\_\_

SALES TAX STATUS: TAXABLE: \_\_\_\_\_ EXEMPT (Attach Cert. to form): \_\_\_\_\_

LIFE INSURANCE (Individual) Amount & Name of Company: \_\_\_\_\_

ACCOUNTS RECEIVABLE OUTSTANDING \$: \_\_\_\_\_ INVENTORY \$: \_\_\_\_\_

TRADE REFERENCES: COMPLETE NAME, ADDRESS, ZIP, FAX AND PHONE NUMBER (PLEASE GIVE 3)

1: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

2: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

3: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

4: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

TRUCKS AND EQUIPMENT OWNED: \_\_\_\_\_ BALANCE UNPAID: \_\_\_\_\_

AMOUNT OF OUTSTANDING NOTES, CHATTEL MORTGAGES OR OTHER OWING: \_\_\_\_\_

BANK REFERENCE & ACCOUNT #: \_\_\_\_\_

NAME & PHONE NUMBER OF BANK LOAN OFFICER: \_\_\_\_\_

HAVE YOU EVER FILED BANKRUPTCY? YES: \_\_\_\_\_ NO: \_\_\_\_\_ IF YES, DATE FILED: \_\_\_\_\_

REAL ESTATE OWNED: \_\_\_\_\_ AMOUNT OF MORTGAGES: \_\_\_\_\_

NAME OF MORTGAGER HOLDING MORTGAGE: \_\_\_\_\_

TITLE IN NAME OF: \_\_\_\_\_

FIRE INSURANCE ON REAL ESTATE (AM'T) \_\_\_\_\_ FIRE INS. ON CONTENTS (AM'T): \_\_\_\_\_

THE ABOVE INFORMATION IS FOR THE PURPOSE OF OBTAINING CREDIT AND IS WARRANTED TO BE TRUE. THE UNDERSIGNED AUTHORIZES ROBINSON SUPPLY CO., INC. OR THEIR AGENTS, TO VERIFY AND CONFIRM ANY AND ALL TRADE/CREDIT REFERENCES AND CREDIT WORTHINESS OF APPLICANT, UTILIZING CREDIT REPORTING BUREAUS/AGENCIES, TRADE/CREDIT REFERENCES, MEMBERS OF CREDIT RESEARCH INC., IN ADDITION TO ANY OTHER SOURCES AVAILABLE. APPLICANT AGREES TO PAY A FINANCE CHARGE OF 2% PER MONTH (24% ANNUAL PERCENTAGE RATE) ON ALL PAST DUE INVOICES. I/WE FURTHER AGREE TO PAY ALL COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEYS' FEES. ALL PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE. ALL CLAIMS MUST BE MADE WITHIN 5 DAYS. RETURNED GOODS ARE SUBJECT TO 25% HANDLING CHARGE. APPLICANTS SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY ON INVOICES IN ACCORDANCE WITH THE TERMS STATED.

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

PLEASE PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_