



# Tioga Pipe Supply Co., Inc.

2450 Wheatsheaf Lane

Philadelphia, PA 19137

800-523-3678 215-831-0700

FAX : 215-533-1645 www.tiogapipe.com Sales Order \_\_\_\_\_

## Credit Application

Name of Business: \_\_\_\_\_ Phone # \_\_\_\_\_

Address of Business: \_\_\_\_\_ Fax # \_\_\_\_\_

Email \_\_\_\_\_

Amount of Credit Requested: \_\_\_\_\_ Web site \_\_\_\_\_

Employer Identification # \_\_\_\_\_ SIC Code: \_\_\_\_\_ D & B # \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership: \_\_\_\_\_ Proprietorship: \_\_\_\_\_ Other: \_\_\_\_\_

Date Business Started: \_\_\_\_\_ Has Business ever declared Bankruptcy \_\_\_\_\_

If so when: \_\_\_\_\_ Outside Sales Persons Name: (Internal Use) \_\_\_\_\_

Annual Sales Volume \_\_\_\_\_ Number of Employees \_\_\_\_\_

### Officers of Business:

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

### Trade & Bank References:

Vendor Reference: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Contact Name: \_\_\_\_\_ Fax # \_\_\_\_\_

Vendor Reference: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Contact Name: \_\_\_\_\_ Fax # \_\_\_\_\_

Vendor Reference: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Contact Name: \_\_\_\_\_ Fax # \_\_\_\_\_

Bank Reference: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Account Officer: \_\_\_\_\_ Fax # \_\_\_\_\_

Account Number: \_\_\_\_\_

Bonding Company: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

I hereby certify that the information in this credit application is correct. The information included in this credit application is to be used to determine the amount and conditions of credit to be extended. I understand that the other sources of credit considered necessary in making the determination may also be used. Further, I hereby authorize the bank and trade references listed in this credit application to release the information necessary to assist in establishing a line of credit.

In order to induce Tioga Pipe Supply Co., Inc. to grant credit to the above, the undersigned hereby agrees that all invoices will be paid within 30 days of invoice date. All invoices not paid within 30 days are subject to interest at 18% per annum or the highest rate allowable under the law. If this account goes to collection the undersigned agrees to a minimum of 15% on the balance due on the account or the actual costs of collection, including attorney's fees. The undersigned agrees to be jointly and severally and personally liable for this debt.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_