

PLEASE FILL OUT BOTH SIDES
in it's entirety
Credit Application



The undersigned is applying for credit with Central Steel Supply and agrees to abide by the term and conditions of this application and the Company's standard contract.

1. Company Name: _____
 Address: _____
 City: _____
 State: _____ Zip _____
 Phone: _____ Fax: _____
2. Federal Tax ID or Social Security No: _____ EMAIL: _____
3. Type of Business: _____
4. Amount of Credit Requested: _____
5. **Trade References: - MINIMUM 4** **Fax: 617-666-3027**

<p style="text-align: center;">Reference # 1:</p> <p>Name: _____ Phone: _____</p> <p>Address: _____ FAX: _____</p> <p>City / State: _____</p> <p style="text-align: center;">Reference # 2:</p> <p>Name: _____ Phone: _____</p> <p>Address: _____ FAX: _____</p> <p>City / State: _____</p> <p style="text-align: center;">Reference # 3:</p> <p>Name: _____ Phone: _____</p> <p>Address: _____ FAX: _____</p> <p>City / State: _____</p>	<p style="text-align: center;">Reference # 4:</p> <p>Name: _____ Phone: _____</p> <p>Address: _____ FAX: _____</p> <p>City / State: _____</p> <p style="text-align: center;">Reference # 5:</p> <p>Name: _____ Phone: _____</p> <p>Address: _____ FAX: _____</p> <p>City / State: _____</p> <p style="text-align: center;">Reference # 6:</p> <p>Name: _____ Phone: _____</p> <p>Address: _____ FAX: _____</p> <p>Cty / State: _____</p>
--	---

Office use only Date: _____ Approved: _____ VIA _____ Route _____ Salesman#: _____ Inside Salesman#: _____ Area# _____ SIC# _____ GPA: _____ Credit Limit: _____ # Days _____ Financial _____ Customer#: _____

Please complete other side also!

PLEASE FILL OUT BOTH SIDES
in it's entirety

6. Check which is applicable to you:

Corporation: _____ General Partnership _____ Limited Partnership: _____

Sole Proprietorship: _____ Other _____

7. Taxable: Yes: _____ Tax #: _____ No: _____

8. State where your company was organized: _____ Yrs. In Business _____

9. Have you ever had credit with us before or purchased from us before? _____

If yes, under what name? _____

10. Name or Title of person(s) authorized to act on your behalf: _____

11. Name of President or Owner: _____

We declare that the above information is true correct and complete and is given to induce the Company to extend credit. We authorize the Company to make such credit investigation as the Company sees fit. Including contacting the above trade references and banks to obtain credit reports. We authorize all trade references, banks and credit reporting agencies to disclose to the Company any and all information concerning the financial and credit history of my company and myself.

All payments due pursuant to this agreement and the Company's invoices are due within thirty (30) days. All late payments will incur a 1.5% late fee for every month payment remains past due.

We expect to be paid the amounts agreed to pursuant to this agreement. We reserve the right to hold you responsible for all monies due payable under this agreement, including but not limited to all costs of collection including reasonable attorneys' fees. You also understand that Central Steel is a Massachusetts corporation. In the event there is a dispute over any aspect of this agreement you agree to submit to the jurisdiction of Massachusetts and its courts.

I have read the terms and conditions stated below and agree to all those terms and conditions.

Authorization Signature: _____

Printed Name: _____ Date: _____

General Terms and Conditions

IF APPLICABLE

*****PLEASE ATTACH*****

SALES TAX EXEMPTION CERTIFICATE

Please complete other side also!