



109 Millers Lane  
 Harrisburg, PA 17110  
 Office 717-232-5825  
 Fax 717-238-7841  
 Email: tmarhon@ciescoinc.com

<u>Internal Office Use:</u>	
Salesperson:	
Amount Approved:	
Auth. Signature:	
Approve__	Not Approve__

**CREDIT APPLICATION AND AGREEMENT**

BUSINESS NAME (applicant)\_\_\_\_\_

TRADE NAME\_\_\_\_\_

STREET ADDRESS\_\_\_\_\_

CITY\_\_\_\_\_STATE\_\_\_\_\_ZIP\_\_\_\_\_

PHONE NUMBER\_\_\_\_\_FAX NUMBER\_\_\_\_\_

SALES TAX EXEMPTION NUMBER\_\_\_\_\_

(MUST PROVIDE A SALES TAX EXEMPT. CERTIFICATE)

TYPE OF OWNERSHIP: CORPORATION\_\_PARTNERSHIP\_\_INDIVIDUAL\_\_

ALL OWNERS, PARTNERS, OR IF CORPORATION, OFFICERS:

	TITLE	NAME	ADDRESS	TELEPHONE
1.	_____			
2.	_____			
3.	_____			

TYPE OF BUSINESS \_\_\_\_\_

BEGAN BUSINESS \_\_\_\_\_GROSS ANNUAL SALES \$\_\_\_\_\_

LENGTH OF TIME AT PRESENT LOCATION \_\_\_\_\_

NAME AND ADDRESS OF LANDLORD:

\_\_\_\_\_  
 \_\_\_\_\_

A/P CONTACT: \_\_\_\_\_PHONE \_\_\_\_\_

EMAIL ADDRESS FOR INVOICE AND STATEMENT DELIVERY: \_\_\_\_\_

**MAXIMUM MONTHLY CREDIT REQUESTED** \_\_\_\_\_

BANK REFERENCES

BANK'S NAME \_\_\_\_\_ BANK'S NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CONTACT \_\_\_\_\_ CONTACT \_\_\_\_\_  
ACCOUNT # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

BUSINESS REFERENCES WHERE TRADE IS NOW EXTENDED

NAME \_\_\_\_\_ NAME \_\_\_\_\_  
ACCOUNT # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_  
AMOUNT OUTSTANDING \_\_\_\_\_ AMOUNT OUTSTANDING \_\_\_\_\_  
PHONE \_\_\_\_\_ PHONE \_\_\_\_\_  
FAX \_\_\_\_\_ FAX \_\_\_\_\_

NAME \_\_\_\_\_ NAME \_\_\_\_\_  
ACCOUNT # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_  
AMOUNT OUTSTANDING \_\_\_\_\_ AMOUNT OUTSTANDING \_\_\_\_\_  
PHONE \_\_\_\_\_ PHONE \_\_\_\_\_  
FAX \_\_\_\_\_ FAX \_\_\_\_\_

ARE THERE ANY UNSATISFIED JUDGEMENTS AGAINST YOU? YES \_\_\_\_\_ NO \_\_\_\_\_

IF "YES", TO WHOM OWED? \_\_\_\_\_ AMOUNT \_\_\_\_\_

HAVE YOU FILED FOR BANKRUPTCY, OR BEEN DECLARED BANKRUPT IN ANY BUSINESS  
IN WHICH YOU WERE THE PRINCIPAL IN THE LAST 14 YEARS? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF "YES", EXPLAIN IN DETAIL. \_\_\_\_\_

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CREDIT PRIVILEGES ARE HEREBY APPLIED FOR, AND IT IS UNDERSTOOD AND AGREED THAT THE TERMS OF PAYMENT ARE NET WITHIN 30 DAYS FROM DATE OF THE INVOICE. DELINQUENT ACCOUNTS ARE SUBJECT TO A 1½ % PER MONTH LATE CHARGE. ALSO INDICATED BY MY SIGNATURE BELOW, IS THE AUTHORIZATION TO DO THE INVESTIGATION NECESSARY TO DETERMINE WHETHER OR NOT CIESCO, INC. WILL EXTEND CREDIT AS REQUESTED HEREIN.

IF ANY DEBT ARISING OUT OF A CREDIT GRANTED SUBSEQUENT TO THIS CREDIT APPLICATION AND AGREEMENT (hereinafter the Credit Agreement) BECOMES DELINQUENT, AND IS TURNED OVER TO AN ATTORNEY FOR COLLECTION, APPLICANT AGREES TO PAY UNTO CIESCO, INC. ATTORNEY'S FEES IN THE AMOUNT OF 20% OF THE AMOUNT OF SUCH DELINQUENT DEBT, PLUS ALL COURT AND ATTENDANT COLLECTION COSTS.

