



Southern Fasteners & Supply Inc.

Application for Business Credit

Name of Company: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Shipping Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax: _____

Tax Status: Taxable: _____ Tax Exempt: _____ **Please Attach W9**

Purchasing Reference

Name: _____ Title: _____

Phone Number: _____ Fax: _____

Email: _____

Accounts Payable

Name: _____

Phone Number: _____ Fax: _____

Email: _____

Business/Trade References

1. _____
Business Name Phone Number Fax
2. _____
Business Name Phone Number Fax
3. _____
Business Name Phone Number Fax

Can you anticipate your monthly volume with us? \$ _____

I (We) understand that the information furnished you on this page is for the purpose of obtaining business credit from your firm. That I am (We are) authorized, in my (our) capacity, to bind my (our) firm accordingly. That all accounts or monies due you shall be due and payable at your place of business. That all past due accounts, notes or judgments shall automatically draw interest at the rate of 18 per cent (%) per annum.

Name Title

Name Title

Signature

Signature

Personal Guarantee: In consideration of credit being extended to the above named firm I personally guarantee all indebtedness hereunder. I further agree that this guaranty is an absolute, complete and continuing one and no notice of the indebtedness or any extension of credit already or hereafter contracted by or extended need be given. The terms may be rearranged, extended and/or renewed without notice to me. That I will, within five days from date of notice that the account is past due, pay the amount due.

Name/Signature

Name/Signature

Office Use Only

Date Opened: _____

Notified: _____

Limit: _____

Disapproved: _____

To set up a credit card only account please call: 336-765-1790 and ask for accounts receivable.

Revised 07/13