



Application for Credit

Please Type or print.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Type of Business: _____ Sole Proprietorship _____ Partnership
 _____ Corporation _____ Other: _____

Nature of Business: _____ Years in Business: _____

Will purchases be subject to sales tax? _____ Yes _____ No

If No, Please supply tax and resale certificate.

Can you provide a Certificate of Insurance _____ Yes _____ No

If Yes, Please attach to credit application.

Principal Owners, Partners or Officers

Name: _____ Position: _____

Address: _____

Telephone No. _____

Social Security No. _____

Drivers License No. _____

CREDIT REFERENCES:

1. Company Name: _____

Address: _____

Telephone: _____ Contact: _____

2. Company Name: _____

Address: _____

Telephone: _____ Contact: _____

3. Company Name: _____

Address: _____

Telephone: _____ Contact: _____

BANK REFERENCE:

Name of Bank: _____ Contact: _____

Telephone: _____ Type of Account(s): _____

Checking Acct#: _____ Business Acct#: _____

I, the undersigned , an Owner, Stockholder, Officer, or other (describe "other" relationship to business)
_____, of the above named business or person, in consideration of the extension of
Credit and/or the rental or sale of supplies or equipment to the above named business or persons do hereby guarantee
payment absolute, without the necessity of taking collections actions against said business or person or reducing to
judgment the amounts claimed, of any monies owed by said business or person to Serious Grip & Electric, Inc. or to
W. Stewart Stack for his labor and do agree to be bound by the terms and conditions of any contract entered into by the
above named business or persons and Serious Grip & Electric, Inc. and/or W. Stewart Stack , individually.

Signature: _____ Date: _____

Print Name: _____ Job Title/ Relationship: _____