

Florence *True Value* Hardware & Commercial Supply

P.O. Box 2087 ♦ 290 North Main Street ♦ Florence, Arizona 85132
Local 520-868-0410 ♦ Fax: 520-868-3072
Arizona's Most Unique Hardware Store

BUSINESS ACCOUNT APPLICATION

Business Name: _____ Date: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) ____ - ____ Fax: (____) ____ - ____ Email: _____

Nature of Business: _____ Federal Employer ID#: _____

Do you purchase Resale? No ___ Yes ___ If yes, what is the Resale #? _____

Type of Ownership: Sole Proprietorship ___ Partnership ___ Corporation ___

If Sole Proprietorship, What is your Social Security #: _____ - _____ - _____

If incorporated, under laws of what state? _____ Date Corporation Started: _____

List of Owners or Officers:

Name: _____ Title: _____

Home Address: _____

Phone: (____) ____ - ____ Ext: _____

Name: _____ Title: _____

Home Address: _____

Phone: (____) ____ - ____ Ext: _____

Person in charge of accounts payable: _____

Phone: (____) ____ - ____ Ext: _____

Do you require a purchase order number? No ___ Yes ___ Written or Verbal? _____

If purchases are only to be made by authorized personnel, please indicate names:

_____	_____
_____	_____
_____	_____
_____	_____



Trade References:

Name: _____

_____ Date Acct Opened: _____

Street Address: _____

Contact: _____ Phone: (____) ____ - _____ Fax: (____) ____ - _____

Name: _____ Date Acct Opened: _____

Street Address: _____

Contact: _____ Phone: (____) ____ - _____ Fax: (____) ____ - _____

Name: _____ Date Acct Opened: _____

Street Address: _____

Contact: _____ Phone: (____) ____ - _____ Fax: (____) ____ - _____

Bank Reference: (Include Savings and Checking Accounts)

Bank: _____ Branch: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Account#: _____ Contact: _____ Phone: (____) ____ - _____

Bank: _____ Branch: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Account#: _____ Contact: _____ Phone: (____) ____ - _____

TERMS AND CONDITIONS OF SALE ON OPEN ACCOUNT:

We close our monthly cycle at the end of business on the 25th day of each month. All accounts are payable by the 10th day of the following month. We reserve the right to place any account on C.O.D. if delinquent as of the 20th day.

All invoices not paid by the 10th day of each month following purchase are considered past due and will be charged a time price differential fee (commonly referred to a late charge) of 2% per month, or the highest rate provided by the law of the state of Arizona.

Should legal action be used by the seller to obtain payment for goods or materials, the seller shall be entitled to the right of recover from the buyer, all reasonable costs incurred in collection and attorney's fees expended taking such action together with all costs thereof.

The undersigned hereby affirms that the information on this application is true and correct. The undersigned agrees to the terms of sales as set forth above. The applicant also agrees to hold harmless any of the previously mentioned credit references who in good faith provided to Florence True Value Hardware with credit information.

Signature of applicant: _____ Date: _____

Print Name of applicant: _____

Company: _____ Title: _____

Store Use Only Initials: _____ Assigned Acct#: _____