



APPLICATION FOR 30 DAY COURTESY ACCOUNT

DATE _____

NOTE: ALL QUESTIONS MUST BE ANSWERED IF APPLICABLE TO APPROVE CREDIT (PLEASE PRINT)

2239 BANKSVILLE ROAD • PITTSBURGH, PA 15216
PHONE (412) 571-0333 • FAX (412) 571-0994

COMPANY NAME _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

FAX NUMBER _____ EMAIL _____

TYPE OF BUSINESS _____ CORPORATION _____

NO. OF YEARS ESTABLISHED _____ CO-PARTNERSHIP _____ INDIVIDUAL PROPRIETOR _____

IF A BRANCH OFFICE OR A DIVISION, GIVE NAME OF PARENT COMPANY AND HOME OFFICE

PERSON IN CHARGE OF ACCOUNTS PAYABLE _____ PHONE _____

EMAIL _____ RESIDENCE _____

OWNER OR PRESIDENT NAME _____ ADDRESS _____ TITLE _____ HOME PHONE _____

CO-PARTNERSHIP NAME _____ RESIDENCE _____ TITLE _____ ADDRESS _____ HOME PHONE _____

P.O. REQUIRED YES NO

Table with 2 columns and 6 rows for authorized persons.

BANK: NAME _____ CONTACT PARTY _____ TELEPHONE _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____

TRADE CREDIT REFERENCES:

SHOWING TWO OR MORE YEARS EXPERIENCE. NAME ADDRESS CITY-STATE PHONE NO. FAX NO. NAME ADDRESS CITY-STATE PHONE NO. FAX NO.

We call it a "Courtesy Account", not charge account, because we are not attempting to establish an elaborate credit system, but are performing a necessary courtesy to our customers. WE DO INVOICE YOUR ACCOUNT, BUT DO NOT SEND STATEMENTS. OUR TERMS ARE STRICTLY NET!

Should BANKSVILLE EXPRESS not receive payment within 30 days, in addition a late charge in the amount of 1 1/2% per month will be added. After 60 days, the purchaser agrees to pay any legal action or collection agency fees in any amount due.

Failure to complete all items, particularly full names and addresses, may result in a delay and inconvenience to you. Please be assured that all information will be held in the strictest of confidence. If you have any questions about paying or rearranging payments, please do not hesitate to call. Thank you.

BY _____ TITLE _____

DATE _____ X _____ SIGNATURE OF OWNER OR RESPONSIBLE AGENT

FOR CREDIT DEPARTMENT USE ONLY APPROVED [] REJECTED [] SIGNATURE _____

REMARKS _____

SALES REP. _____