



ELECTRIC SUPPLY CO. OF CARLSBAD, INC.



Post Office Drawer KK
Carlsbad, NM 88221-7528
Phone (575) 887-3561
Fax (575) 885-8466

DATE _____

NAME OF FIRM: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____ TELEPHONE _____

CITY & STATE: _____ ZIP _____ FAX _____

FED. EMPLOYMENT ID NUMBER (FEIN) OR (SS NO.) _____ E-MAIL _____

TAXPAYER ID NUMBER (If exempt, please furnish exempt cert.) _____

Is this the same address to which Monthly Statements and/or Invoices should be mailed for approval and payment? YES NO
If NO please advise of any additional addresses necessary to properly handle your account.

TYPE OF BUSINESS: _____
(e.g. INDUSTRIAL, CONSTRUCTION, OIL FIELD, MINING, etc.)

MONTH/YEAR BUSINESS STARTED _____ / _____ ESTIMATED CREDIT REQUIREMENT: _____

TEMPORARY ACCOUNT (i.e., Are you in the area for a limited time?) YES NO

IF YES, APPROX. HOW LONG? _____ IF YES, PROJECT AND/OR JOB NUMBER ON WHICH YOU ARE WORKING: _____

BUYERS AUTHORIZED NAME _____ SIGNATURE _____

TO SIGN P.O.s NAME _____ SIGNATURE _____

AND/OR VERBALLY NAME _____ SIGNATURE _____

ORDER MERCHANDISE NAME _____ SIGNATURE _____

IS THIS A CORPORATION? _____ PARTNERSHIP? _____ PROPRIETARY? _____

IF YOU ARE PART OF A LARGER COMPANY OR CORPORATION (Such as a Branch or Affiliate) WHAT IS THE:

NAME: _____

MAILING ADDRESS: _____ TELEPHONE _____

CITY & STATE: _____ ZIP _____

X

WHO ARE THE PRINCIPALS OR OWNERS OF THE BUSINESS?

PRESIDENT OR OWNER _____

OTHERS _____

X

HAVE THE OWNERS EVER DECLARED BANKRUPTCY EITHER PERSONALLY OR AS ANOTHER BUSINESS? YES NO

CREDIT REFERENCES: (Please supply references with which this firm has regularly done business for at least one year).
(Pre-printed form acceptable) (Corporate Credit phone please).

1. NAME _____ ADDRESS _____

CITY

STATE

ZIP

TELEPHONE

FAX

2. NAME _____ ADDRESS _____

CITY

STATE

ZIP

TELEPHONE

FAX

3. NAME _____ ADDRESS _____

CITY

STATE

ZIP

TELEPHONE

FAX

BANK REFERENCE:

NAME: _____ TELEPHONE _____

ADDRESS: _____ CITY _____ STATE _____

IN CONSIDERATION OF CREDIT GRANTED BY ELECTRIC SUPPLY CO. OF CARLSBAD, INC. THE UNDERSIGNED GUARANTEES ANY AND ALL CHARGES AND/OR MONEY DUE ELECTRIC SUPPLY CO. OF CARLSBAD, INC. THIS SUM TO INCLUDE ANY AND ALL ATTORNEY'S FEES AND COLLECTION COSTS IN THE EVENT PAYMENT IS DEMANDED BY ELECTRIC SUPPLY CO. OF CARLSBAD, INC.

DATE _____, 20 _____ SIGNED _____

TITLE _____

I certify that the above information is true and correct to the best of my knowledge.

X

SIGNED

TITLE OR POSITION

In signing this form I hereby authorize Electric Supply Company of Carlsbad, Inc., to obtain relevant credit information from any of the above listed sources. I also understand that if charges are not paid within the allotted credit terms the company applying for this credit will pay any reasonable attorney fees and/or collection fees incurred by Electric Supply Company of Carlsbad, Inc., in obtaining payment. Furthermore, if credit is granted I agree to pay finance charges of 1 1/4% per month or the maximum allowed by law on the balance of past due charges.

It is imperative that credit applications be filled out entirely.

Fax numbers and account numbers on credit references help to expedite credit checks as most business will only give ratings via fax.

Please date and sign both lines at bottom of page two of credit application.