

RJ WRIGHT & SONS LTD

100 WEST STREET
NEWCOMERSTOWN, OHIO 43832
(740) 498-6236 FAX (740) 498-6763

CREDIT APPLICATION

Date: _____

Full Legal name of Applicant: _____

Address: _____
Street

_____ City State Zip Code

Phone: _____

Fax: _____

Cell phone: _____

E-Mail: _____

Contact Person: _____

Type of Business:

- _____ Partnership
_____ Individual Proprietorship
_____ Corporation
_____ Limited Liability Company ("LLC")
_____ Other _____

How long in existence? _____ years
If corporation or LLC,
State Organized in _____
Date Organized _____
Tax Exempt No. _____
EIN # _____

Officers / Owners / Principals:

NAME	HOME ADDRESS	SOC. SEC. NO.	TITLE
A)			
B)			
C)			
D)			

NOTE: CHARGES WILL BE ACCEPTED ONLY FROM THE ABOVE-LISTED PERSONS. ANY CHANGE IN AUTHORIZED AGENTS MUST BE SUBMITTED IN WRITING AND CONFIRMED AS ACCEPTED.

Credit References: Please indicate the name(s) of bank(s) where you have a Savings or Checking Account and business(es) that will provide a credit reference based upon prior transactions with you.

1) BANK NAME _____ PHONE NO. _____

ADDRESS _____
Street City, State, Zip

2) BANK NAME _____ PHONE NO. _____

ADDRESS _____
Street City, State, Zip

3) REFERENCE NAME _____ PHONE NO. _____

ADDRESS _____
Street City, State, Zip

4) REFERENCE NAME _____ PHONE NO. _____

ADDRESS _____
Street City, State, Zip

5) REFERENCE NAME _____ PHONE NO. _____

ADDRESS _____
Street City, State, Zip

**PERSONAL GUARANTEE FOR CORPORATE, LIMITED LIABILITY COMPANY
AND PARTNERSHIP ACCOUNTS**

IN CONSIDERATION FOR THE CREDIT EXTENDED TO THE APPLICANT, THE UNDERSIGNED HEREBY GUARANTEES AND AGREES TO BE PERSONALLY LIABLE FOR ALL INDEBTEDNESS INCURRED BY THE APPLICANT THROUGH ANY OF ITS AUTHORIZED AGENTS LISTED ABOVE.

Signed _____ Print Name _____

Signed _____ Print Name _____

IMPORTANT INFORMATION – PLEASE READ

By signing this agreement, I/We agree to the terms and conditions of credit. I/We certify that the above information is true and correct, and I/we agree to pay this account in accordance with the terms and conditions attached hereto. I/We agree to pay for all charges on this account and agree that any additions or deletions will be made in writing. I/We also authorize you to verify this information and/or obtain additional information by securing data from a credit reporting agency. I/We also agree that you may charge a LATE CHARGE of 2% PER MONTH; on any invoices due and owing more than 10 days. Terms for all invoices are as follows – 10 days on all deliveries made by RJ Wright & Sons LTD.

Signed: _____ Title _____ Date: _____

Signed: _____ Title _____ Date: _____

Note: If a partnership, all partners must sign; if a corporation, an authorized corporate officer must sign.
