

**Active Plumbing Supply Company  
CREDIT APPLICATION FOR COMPANIES**

- ( ) 216 Richmond St., Painesville, Ohio 44077 (440) 352-4411 *Cleveland Line* (440) 946-5600
- ( ) 38033 Elm St., Willoughby, Ohio 44094 (440) 953-1532
- ( ) 9890 E. Washington St., Chagrin Falls, Ohio 44023 (440) 543-2233
- ( ) 1220 Lake Ave., Ashtabula, Ohio 44004 (440) 964-7575
- ( ) 239 Brookpark Road, Cleveland, Ohio 44109 (216) 459-2700
- ( ) 1754 Moore Rd. Avon, Ohio 44011 (440) 934-3720

**Please return by mail to Painesville, or by Fax to: (440) 352-0096 or by E-Mail at [www.activeplumbing.com](http://www.activeplumbing.com)**

Date: \_\_\_\_\_ Account Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax#: \_\_\_\_\_

Years in business: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Ownership: ( ) Sole Owner ( ) Partnership ( ) Corporation Duns #: \_\_\_\_\_

**Name(s) of Owners, Partners or Officers**

1.) \_\_\_\_\_

Name	Title	Address	Telephone
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2.) \_\_\_\_\_

Name	Title	Address	Telephone
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List names of persons authorized to charge: \_\_\_\_\_

**How would you like to receive your invoices: US Mail?      Email? (please circle your preference)**

**EMAIL ADDRESS:** \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

\*\* Please Note: Purchase order #'s and/or a job name is required on all orders

Please indicate the amount of credit limit desired: \$ \_\_\_\_\_

Bank: \_\_\_\_\_ Branch Location: \_\_\_\_\_

Authorized signature to release banking information: \_\_\_\_\_

References: ( **WHOLESALE** houses only! ) **Not:** Home Depot/Lowes) where you now have credit.

NAME	ADDRESS	CITY	FAX NUMBER
1.) _____	_____	_____	_____
2.) _____	_____	_____	_____
3.) _____	_____	_____	_____
4.) _____	_____	_____	_____

**We require Four (4) Wholesale Credit References, or a CASH (COD) account will be opened.**

Fax numbers for all credit references will expedite the process.

Are you taxable?: \_\_\_\_\_ Or Tax Exempt?: \_\_\_\_\_ (Please enclose copy of exemption certificate)

The above information is for the purpose of obtaining credit and is warranted to be true. We agree to pay all invoices by the 10th of the following month of purchase at 2% discount or on the 25th at net. It is further agreed that purchases not paid within 30 days of billing date are subject to a finance charge of 1.5% monthly, 18% annually.

SIGNED: \_\_\_\_\_ PRINT SIGNER'S NAME: \_\_\_\_\_

**Both sides of this credit application must be completed to be accepted.**

**OVER**

**Active Plumbing Supply Company  
CREDIT APPLICATION FOR COMPANIES  
PERSONAL GUARANTEE**

**The undersigned further agrees to be held personally liable upon this account to Active, notwithstanding the fact that this application has been executed in a corporate or representative capacity. I acknowledge that I have read the terms and conditions contained on page one hereof which are incorporated herein and expressly agree and assent to same.**

**TERMS: For the purpose of securing the extension of credit from Active Plumbing Supply Company (“Active”) and /or of it’s subsidiaries of affiliated companies, the undersigned represents and warrants that the statements made and information contained herein, and in the financial statement, if any, submitted, herewith, are complete, correct and true, made with the intent that strict reliance be placed thereon as the basis for the extension and continuation of credit accommodations to the undersigned.**

The undersigned further agrees that notwithstanding the fact that this application has been executed in a corporate or representative capacity, each signer hereof by such signature hereby assumes personal and individual responsibility for payment to Active and/or of it subsidiaries or affiliated companies, of all amounts due pursuant to such extension of credit. According to the invoice amount and credit terms stated thereon, said personal and individual responsibility being given in consideration of the extension of credit by Active to the applicant to Active or any of its subsidiaries or affiliated companies, and notwithstanding the fact that this application has been executed in a corporate or representative capacity, each signer hereof by such signature hereby personally guarantees payment to Active or any of its subsidiaries or affiliated companies at Painesville, Ohio all present and future balances of account due from the said applicant, and further agrees to be responsible for any costs incurred in connection with any proceedings for the collection thereof. Applicant and any signer hereof notwithstanding the fact that this application has been executed in a corporate or representative capacity hereby agrees to pay in full amount of said purchases within thirty (60) days of the billing date. Purchases not paid within thirty (60) days are subject to a finance charge of one and half percent (1 1/2%) monthly (18%) annually in the unpaid balance.

At the discretion of the Credit Department, a Personal Credit Report may be ordered to help facilitate the issuance of credit (non-corporate) or the for the purpose of collections in accordance with the Fair Credit Reporting Act.

**It is further agreed that the terms hereof shall take effect immediately upon the execution hereof and the extension of any credit to applicant.**

**Signed:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

<b>Active Use Only:</b>		
<b>Taken By:</b> _____	<b>Approved By:</b> _____	<b>Date:</b> _____