

BUSINESS CHARGE APPLICATION



Ace Hardware of Jackson
 3315 N. Highland
 Jackson, Tn 38305
 Phone : 731-300-3222
 Fax: 731-300-0891

acehardware15930@hotmail.com

APPLICATION INFORMATION

All information will remain confidential.

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Years in Business _____

Person Making Application _____

Title _____

TYPE OF OWNERSHIP

____ Corporation ____ Partnership ____ Sole Proprietorship

Federal ID# _____

or

Social Security # _____

____ Tax Exempt (attach copy of Federal exemption letter)

____ Resale (attach copy of Certificate of Resale)

OWNERSHIP:

Name(s) of Officer(s) and Title _____ Complete Address, City, ST, Zip _____ Phone # _____

Name(s) of Officer(s) and Title _____ Complete Address, City, ST, Zip _____ Phone # _____

FINANCIAL:

Bank _____ Bank Address _____ Zip _____ Phone # _____

Bank Officer or Department _____ Phone # _____

BUSINESS REFERENCES:

Business Name _____ Complete Address, City, ST, Zip _____ Phone# _____ Fax# _____

Business Name _____ Complete Address, City, ST, Zip _____ Phone# _____ Fax# _____

Business Name _____ Complete Address, City, ST, Zip _____ Phone# _____ Fax# _____

Do You Require a Purchase Order? YES NO

No restrictions to charge will be placed on this account unless a specific list of authorized users is provided. Any changes to the list must be submitted in writing.

I/We certify that all the information on this form is correct. I/we fully understand your credit terms and agree to the proper payment in consideration of extended credit. Furthermore, I/we approve of your obtaining information from the above references and a credit report on my company or if not a corporation, a report on me/us personally. If you update, renew, or extend my line of credit, you may request a new report without notice.

Name (Printed) _____

Signature _____

Title _____

DATE _____

Please Do Not Write In Spaces Below--For Ace Hardware Store Use Only

VERIFICATION:

References Checked by: _____

Approved _____ Declined _____

References Comments: _____

By: _____

Date: _____