

ACE HARDWARE # 3616 AND #11296

COMMERCIAL ACCOUNT CREDIT APPLICATION

1194 SAGAMORE PARKWAY W., WEST LAFAYETTE 47906 FAX: 765-497-7150

DATE _____

COMPANY NAME _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____ FAX _____ OWNERSHIP: CORPORATION PARTNERSHIP

PRINCIPAL OWNER(S) _____

Application for credit is hereby made and the following references given. It is understood that this information will be held in the strictest confidence and used only by our Credit Department.

BANK INFORMATION

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PH _____ FAX _____

BUSINESS HISTORY

BUSINESS START DATE _____

TYPE OF BUSINESS _____

INCORPORATED SOLE PROPRIETOR

BUSINESS REFERENCES WHERE CREDIT NOW EXTENDED

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PH _____ FAX _____

ACCOUNT# _____

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PH _____ FAX _____

ACCOUNT# _____

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PH _____ FAX _____

ACCOUNT# _____

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PH _____ FAX _____

ACCOUNT# _____

BUSINESS REQUIREMENTS

ACCOUNT STATEMENTS ARE SENT THE FIRST OF EVERY MONTH FOR THE PREVIOUS MONTHS TRANSACTIONS. SPECIAL INSTRUCTIONS FOR PAYMENT, PLEASE DESCRIBE _____

NOTE: IF YOU DO NOT USE PURCHASE ORDERS OR AUTHORIZED NAMES WE CANNOT BE RESPONSIBLE FOR UNAUTHORIZED PURCHASES TO YOUR ACCOUNT.

WILL YOU BE USING PURCHASE ORDERS OR AUTHORIZED SIGNATURES? _____

IF YOUR BUSINESS WILL BE USING AUTHORIZED SIGNATURES PLEASE LIST BELOW: **PLEASE PRINT NAMES**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

IS YOUR BUSINESS TAX EXEMPT? YES NO IF YES PLEASE FILL OUT THE FOLLOWING FORM:

FORM ST-105

INDIANA GENERAL SALES TAX EXEMPTION CERTIFICATE

(MAY NOT BE USED AS AN AGRICULTURAL EXEMPTION CERTIFICATE)

NAME _____ RRMC NO. _____

ADDRESS _____ DATE _____

BLANKET SINGLE PURCHASE DESCRIPTION OF ARTICLES _____

- SALE TO RETAILER, WHOLESALER OR MANUFACTURER FOR **RESALE ONLY**.
- SALE OF MANUFACTURING MACHINERY, TOOLS AND EQUIPMENT TO BE USED DIRECTLY IN DIRECT PRODUCTION.
- SALES TO NOT-FOR-PROFIT ORGANIZATION, CLAIMING EXEMPT PURCHASES TO CIRCULAR ST-14.

NOTE: MANY PURCHASES BY NOT-FOR-PROFIT ORGANIZATIONS ARE SUBJECT TO SALES TAX; THEREFORE, PURCHASER IS CAUTIONED TO READ CIRCULAR ST-14 BEFORE SIGNING THIS CERTIFICATE.

- SALES TO GOVERNMENT UNITS.
- OTHER: EXPLAIN _____

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THE PROPERTY THAT IS TO BE PURCHASED BY THE USE OF THIS EXEMPTION CERTIFICATE IS TO BE USED FOR AN EXEMPT PURPOSE PURSUANT TO THE **STATE OF INDIANA GROSS RETAIL SALES TAX ACT**.

SIGNED _____ TITLE _____

COMPANY EXEMPTION CERTIFICATES ARE NOT VALID FOR PERSONAL PURCHASES

I UNDERSTAND YOUR TERMS AND AGREE TO ABIDE BY THEM

I UNDERSTAND THAT THE ABOVE CREDIT INFORMATION IS FOR THE SOLE PURPOSE OF OBTAINING CREDIT WITH ACE HARDWARE WEST LAFAYETTE, AND ACE HARDWARE LAFAYETTE, INDIANA. FURTHERMORE, I CERTIFY THE INFORMATION TO BE CORRECT AND ACCURATE AS OF THE DATE OF APPLICATION. I AGREE AND UNCONDITIONALLY GUARANTEE TO BE HELD LIABLE FOR ANY INDEBTEDNESS ACCRUED UNDER THIS CONTINUING AGREEMENT. **TERMS ARE NET 30, A 1.5% SERVICE CHARGE WILL BE ASSESSED IF THE ACCOUNT IS 30 DAYS PAST DUE.**

SHOULD IT BECOME NECESSARY TO TAKE LEGAL ACTION TO COLLECT THE ACCOUNT BALANCE, OR PLACE THIS ACCOUNT WITH AN ATTORNEY FOR COLLECTION, APPLICANT AGREES TO PAY ALL FEES AND LEGAL COSTS ASSOCIATED WITH THE COLLECTION.

UNDERSIGNED MUST BE ONE OF THE FOLLOWING: OWNER, SOLE PROPRIETOR / GENERAL PARTNER / CORPORATE OFFICER

SIGNED _____ PLEASE PRINT NAME _____

TITLE _____ DATE _____

PLEASE COPY FOR YOUR RECORDS

FAX OR MAIL

ACCOUNT WILL BE AVAILABLE AT ACE HARDWARE WEST LAFAYETTE AND LAFAYETTE