



3453 Fowler Street  
Fort Myers, FL 33901

P 239-334-6676  
info@supplies-plus.com  
www.supplies-plus.com

Please submit your application via email, drop off  
at to your local Supplies Plus store or return to your  
sales or customer service representative.

## CREDIT APPLICATION

Company Name			Trade Name (DBA/AKA)		
Billing Address			Shipping Address		
City	State	Zip	City	State	Zip
Telephone	Fax	County	Email Address for MSDS - Required		
Date Established	# of Employees	Years at this Location	Own	Rent	If Rent, Landlords Name

**IMPORTANT - Taxable:** YES \_\_\_\_ NO \_\_\_\_ If No, Complete/Supply Tax Exception Certificate

<b>Corporate Information</b> Dunn & Bradstreet Nbr#			Subsidiary/Division/Branch of:		
Officer Contact			Buying Group (if applicable)		
<b>Partnership or Individual(s)</b> Name			Home Address		
City	State	Zip	Social Security #		
Name			Home Address		
City	State	Zip	Social Security #		

### REFERENCES: Primary Suppliers/Bank

Name	City	State	Zip
Address	Telephone	Fax	Email
Name	City	State	Zip
Address	Telephone	Fax	Email
Bank Name	City	State	Zip
Address	Telephone	Fax	Email
Checking ____ Savings ____ Loan ____	Bank Officer/Contact		
Account #	Email		

Would you prefer invoices emailed rather than mailed? Yes \_\_\_\_ Email Address \_\_\_\_  
Preferred Method of Payment: ACH \_\_\_\_ Online Payment \_\_\_\_ (Page 1 of 2) Applicant must review and sign page 2.

Applicant's signature certifies that the above information is correct. As part of the application for credit, Applicant grants Supplies Plus permission to contact consumer credit reporting agencies, commercial credit reporting agencies and may or of all of the trade and bank references listed above, together with any other references which may be provided by these trade and bank references. Applicant further agrees to provide stand alone financial statements including, but not limited to, Income Statement(s) & Balance Sheet(s) of Cash Flow, Seller retains title to all products until such products are paid in full without any offset. Applicant agrees that transactions with Supplies Plus shall, unless superseded by a written contract signed by both parties, be governed by the Terms and Conditions of Sale in effect at the time of any order, which are herein incorporated by reference. Applicant further agrees to be responsible for any collection and attorneys' fees which may be incurred should its account become past due.

Buyer is solely responsible for ensuring that payment is made to Seller's correct location. For fraud avoidance purposes, Seller will never initiate payment changes via email or telephone. In the event Seller needs to change its payee bank account information or payment method, then must contact Seller's representative to positively confirm the account change. At all times Buyer is responsible for ensuring that payment is made to Seller's correct location and Buyer accepts responsibility for misdirected funds.

**Please attach Current Financial Statements. A non-disclosure agreement can be provided upon request.**

Date: \_\_\_\_\_ Authorized Signature/Title: \_\_\_\_\_

Contact Information				
Department	Name	Title	Phone Number	Email Address
Purchasing				
AP				
Office Manager				
Inside Sales				