

J.M. Brady Company

Established 1952



APPLICATION FOR CREDIT

Please complete this form and mail to the address above. Thank you.

NAME OF BUSINESS

ADDRESS

NAME OR OWNER

ADDRESS OF OWNER

SALES TAX OR TAX EXEMPT NUMBER
(PLEASE ATTACH COPY OF RESALE CERTIFICATE)

TYPE OF BUSINESS (CHECK ONE)

CORPORATION

PARTNERSHIP

SOLEOWNERSHIP

BUSINESS PHONE

HOME PHONE

LIST THREE (3) BUSINESS REFERENCES WITH WHOM YOU HAVE CREDIT TERMS OR EXPERIENCE.
PLEASE INCLUDE NAMES, ADDRESSES AND ACCOUNT NUMBERS.

1. _____
2. _____
3. _____

NAME OF BANK

ACCOUNT NUMBER

ACCOUNT OF CREDIT APPLIED FOR: \$ _____

IN REQUESTING CREDIT, I ACCEPT THE FOLLOWING PROVISIONS:

1. THE TERMS ARE NET 15 DAYS.
2. A DELINQUENT ACCOUNT IS SUBJECT TO A 1.5% MONTHLY SERVICE CHARGE AND ANY LEGAL OR COLLECTION FEES, IF APPLICABLE.
3. ALL NSF CHECKS ARE SUBJECT TO A \$20.00 SERVICE CHARGE.

SIGNATURE OF APPLICANT

DATE