



# APPLICATION FOR CREDIT

To Avoid Delay in Processing, Please Complete in Full.  
All Information To Be Held in Confidence

Fax or EMail To: [accounting@colonyhardware.com](mailto:accounting@colonyhardware.com)  
Phone: 203-469-0000 Fax: 203-468-3043

<b>COMPANY INFORMATION</b>		
Name of Company: _____		Date: _____ Desired Monthly Credit Line:\$ _____
Billing Address: _____		
City : _____	State: _____	Zip: _____
Shipping Address: _____		
City : _____	State: _____	Zip: _____
Company Website: _____	Phone: _____	Fax: _____
Purchasing Manager: _____	PM EMAIL : _____	
<b>GENERAL BUSINESS INFORMATION</b>		
Type of Business: _____	( ) Individual ( ) Corporation ( ) Partnership	
Owner(s) Names (s): _____	Title: _____	
Federal ID# _____	Duns #: _____	
Accounts Payable Contact: _____	AP EMAIL : _____	
<b>ELECTRONIC INVOICING</b>		
Do you want to receive your emails electronically as a PDF? _____ YES _____ NO		
<b>AUTHORIZED PURCHASERS: (OR PLEASE ATTACH A LIST)</b>		
1. _____		
2. _____		
3. _____		
4. _____		
INVOICING EMAIL : _____		
<b>OTHER INFORMATION</b>		
Do you require a purchase order number? _____ YES _____ NO		Do you use a credit card for purchasing? _____ YES _____ NO
Credit card# _____		Expiration Date _____
Name on Card _____		Authorized Users _____
_____		_____
_____		_____
<b>BANK REFERENCES</b>		
Bank Name: _____	Checking Acct. # _____	
Address: _____	Contact: _____	
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	
<b>TRADE REFERENCES</b>		
Name: _____	Name: _____	Name: _____
Address: _____	Address: _____	Address: _____
City _____	City _____	City _____
State: _____ Zip: _____	State: _____ Zip: _____	State: _____ Zip: _____
Phone: _____	Phone: _____	Phone: _____
Fax: _____	Fax: _____	Fax: _____

**"PERSONAL AND/OR CORPORATE GUARANTEE"**

"Purchaser" The Undersigned hereby guarantees Colony Hardware Corporation full and prompt payment at maturity of all Invoices that Colony Hardware Corporation renders for merchandise and or services furnished. The Undersigned also agrees to pay an 18% per annum service charge should the account become delinquent, and all Collection and Attorney Fees, should the indebtedness have to be collected by outside sources.

**CERTIFICATION:** The Applicant certifies the following:

- (1) The information I provided is true and correct and has been submitted to obtain commercial credit;
- (2) I am authorized to execute applications and other documents required to establish commercial credit accounts on behalf of Applicant;
- (3) Seller is hereby authorized to investigate and verify any information provided and inquire of references or others as to credit worthiness;
- (4) Seller may answer questions from others about its credit experience with the Applicant/Company.
- (5) Seller may use any credit card on file for payment of past due balances as authorized.

**Applicant/ Purchaser:** \_\_\_\_\_  
Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_