los gatos plumbing supply
saratoga plumbing supply
a General Plumbing Supply company

| APPLICATION FOR CREDIT

Please return to creditdept@genpl.com | For questions and inquiries: (925) 939-4622

BRANCH LOCATION: ☐ Saratoga ☐ Los Gatos

CREDIT LIMIT _____ **CONTRACTORS LICENSE #** _____

RESALE# _____ **CLASS** _____

SOCIAL SECURITY # _____ **FEDERAL ID #** _____

FRIM NAME _____ **TELEPHONE** _____

NAME OF PARENT COMPANY IF SUBSIDIARY _____ **EMAIL** _____

BILLING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **COUNTY** _____

STREET ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **COUNTY** _____

☐ **CORPORATION** **YEAR INCORPORATED** _____ **LIST CORPORATE OFFICES:**

NAME _____ **TITLE** _____

NAME _____ **TITLE** _____

☐ **PARTNERSHIP** **YEAR PARTNERSHIP ESTABLISHED** _____ **LIST PARTNERS:**

NAME _____ **PHONE** _____ **SS#** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

NAME _____ **PHONE** _____ **SS#** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

☐ **OWNER** **YEAR BUSINESS ESTABLISHED** _____

NAME _____ **PHONE** _____ **SS#** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

BUSINESS CREDIT REFERENCES

NAME _____ **PHONE** _____ **EMAIL** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

NAME _____ **PHONE** _____ **EMAIL** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

NAME _____ **PHONE** _____ **EMAIL** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

NAME _____ **PHONE** _____ **EMAIL** _____

ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

D&B RATED? ☐ YES ☐ NO LISTED? ☐ YES ☐ NO

CITY _____ STATE _____ ZIP _____

*** PERSONAL GUARANTEE ***

PERSONAL GUARANTEE MUST BE SIGNED

* _____, personally guarantee all charges made as a result of this Credit Application, including attorneys' fees and costs, should payment not be made in accordance with the terms and conditions of sale. "I understand that General Plumbing Supply is relying upon this Personal Guarantee in extending credit to applicant".

NAME _____ TELEPHONE # _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SPOUSE'S NAME _____

☐ RENTING WHERE FINANCED? _____

☐ BUYING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PRINT NAME _____ DATE _____

SIGNATURE _____ DATE _____

All the information I (we) have stated on this application is correct, and I (we) authorize General Plumbing Supply to make any inquiries to my (our) bank or others about my (our) finances, credit, and personal references they feel are necessary and provide information to others as permitted by law. I hereby agree that, if this application is approved and credit is extended, to pay my account in full on or before the 10th of the month following purchases. If any invoices are not paid in 60 days of invoice, all discounts will be revoked and prices reverted to list. In the event any legal action is necessary to enforce payment or collect any sums due hereunder the prevailing party shall be entitled to attorneys' fees and all costs and expenses necessarily incurred.

*SIGNED _____ Date _____

**SIGNED _____ Date _____