



Stanco Plumbing Specialties Co.

P.O. Box 35377
Houston, TX 77235-5377
accounting@stancousa.com

Ph: 1-800-392-5066
713-664-3333
Fax 713-664-4142

Visit our website: www.stancousa.com Date: _____

CREDIT APPLICATION

Legal Company Name: _____

Billing Address _____

City _____ State: _____ Zip _____

Phone _____ Fax _____

Accounts Payable Name _____

Shipping Address _____

City _____ State: _____ Zip _____

Phone _____ E-mail _____

Owner _____ Address _____

City _____ State: _____ Zip _____

Phone _____

Taxable? Y N Tax ID No. _____ P.O. Req'd? Y N

TRADE REFERENCES:

Firm _____ Account No. _____

Address _____

City _____ State: _____ Zip _____

Phone _____ Fax _____

Comments: _____

Firm _____ Account No. _____

Address _____

City _____ State: _____ Zip _____

Phone _____ Fax _____

Comments: _____

Firm _____ Account No. _____

Address _____

City _____ State: _____ Zip _____

Phone _____ Fax _____

Comments: _____

BANK REFERENCE

Name of Bank _____ Branch Office _____

Address _____

City _____ State: _____ Zip _____

Phone _____ Fax _____

Comments: _____

The undersigned hereby authorizes the above-referenced Bank to give a credit rating to the Credit Representative of Stanco Plumbing Specialties Company.



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ACCOUNT AGREEMENT

Extension of Credit by Seller to Applicant shall be subject to and in consideration of the following Terms and Conditions. Applicant agrees as follows:

1. Payment terms unless otherwise specified are net 30 days from Invoice date.
2. All accounts or monies due you shall be payable at your place of business.
3. A Service Charge of one and one-half percent per month (1.5%/month) will be charged on all accounts not paid with the specified terms.
4. In the event of any default in payment, the undersigned also agrees to pay any and all fees, court costs and interest incurred through collection procedure.

I (We) understand that the information furnished you on this application is for the purpose of obtaining credit from your firm. That I am (we are) authorized, in my (our) capacity, to bind my (our) firm accordingly. That all past due accounts, notes, or judgments shall automatically draw interest (compounded daily) as stated.

Signed By: _____ Date: _____

Title: _____

(Application not valid without authorized signature)

For Stanco office use only:	
Date Approved: <input type="text"/> / <input type="text"/> / 20 <input type="text"/>	Sales Representative: <input type="text"/>
Credit Terms: <input type="text"/>	Territory: <input type="text"/>
Credit Limit: <input type="text"/>	Approved By: <input type="text"/>
Comments: <input type="text"/>	
<input type="text"/>	
<input type="text"/>	