



Application For Credit

Fax To: 585-295-9399

Complete Legal Name of Business:			Business Type:	
			<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
			<input type="checkbox"/> LLC	<input type="checkbox"/> Sole Proprietor
Business Street Address:		City:	State:	Zipcode:
Mailing Address (if different from physical address):		City:	State:	Zipcode:
Telephone: () ()	FAX: () ()	Mobile: () ()	eMail:	
Industry:		Organization State of & Year	Federal ID #:	
<input type="checkbox"/> General Construction	<input type="checkbox"/> Excavation / Paving	<input type="checkbox"/> Electrical		
<input type="checkbox"/> Environmental	<input type="checkbox"/> Masonry / Concrete	<input type="checkbox"/> Plumbing		
<input type="checkbox"/> Engineering	<input type="checkbox"/> Surveyor	<input type="checkbox"/> Steel / Structural		
<input type="checkbox"/> Other: _____ SIC Code: _____		Company Website Address / URL:		

Owner(s) / Officer(s):			
Name (First, MI, Last):		Title:	Social Security No.:
Street Address:		City:	State: Zipcode:
Name (First, MI, Last):		Title:	Social Security No.:
Street Address:		City:	State: Zipcode:

Accounts Payable Contact:		Purchase Order Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name:	Phone:	Fax:	eMail:

Bank Information:			
Bank Name:		Account No.:	Contact:
		Phone:	Fax:
Street Address:		City:	State: Zipcode:

Bonding Information:			
Name:		Account No.:	Contact:
		Phone:	FAX:
Street Address:		City:	State: Zipcode:

Trade References:			
Business Name:		Street Address:	City: State:
Phone:	FAX:	Account No.:	Contact Name:
Business Name:		Street Address:	City: State:
Phone	FAX:	Account No.:	Contact Name:
Business Name:		Street Address:	City: State:
Phone	FAX:	Account No.:	Contact Name:

The undersigned customer authorizes Admar Supply Company, Inc. to obtain credit/consumer reports or any other credit information on the guarantor, owner, and/or president. Customer agrees to pay all charges within 30 DAYS of the date of purchase and agrees to pay finance charge(s) of 1.5% (annual rate 18%) per month on any balance due over 30 days together with reasonable collection charges including attorney fees. If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. Admar Supply Company, Inc. reserves the right to rescind the credit account without any prior notification. Photostat, facsimile or email copy of all Admar documents shall be treated as original documents.

Signature _____ Title _____ Date ____/____/____

Personal Guaranty – Required

I (we) personally guarantee payment of any balance due on this account and any account of any successor corporation in which guarantor(s) has an interest including finance charges, collection charges, and attorney's fees.

Signature: _____ Date: ____/____/____

Signature: _____ Date: ____/____/____



Information Page (required):

Authorized Personnel (for ADMAR Orders):

Contact:	Title:	Mobile / Phone:	eMail:
1.			
2.			
3.			
4.			

Current Company Projects:

Jobsite Name:	Address (or intersection);	Estimated Completion Date:
1.		___/___/___
2.		___/___/___
3.		___/___/___
4.		___/___/___
5.		___/___/___
6.		___/___/___

Project / Jobsite Superintendents (match to projects above):

Contact:	Title:	Mobile / Phone:	eMail:
1.			
2.			
3.			
4.			
5.			
6.			

Other Business Information:

Years in Business:	Equipment Needs: (check ALL that apply) <input type="checkbox"/> Forklifts <input type="checkbox"/> Generators <input type="checkbox"/> Skidsteers <input type="checkbox"/> Excavators <input type="checkbox"/> Lighting <input type="checkbox"/> Aerials/Booms <input type="checkbox"/> Scissors <input type="checkbox"/> Other _____	Estimated Annual Sales (\$):
Number of Employees:		Dunn & Bradstreet (D&B) No.:
Have you filed Bankruptcy in the last ten (10) years? <input type="checkbox"/> Yes <input type="checkbox"/> No		Any lawsuits pending? <input type="checkbox"/> Yes <input type="checkbox"/> No
Comments _____		

ADMAR Office Use ONLY:

ADMAR Salesperson:	<input type="checkbox"/> Approved <input type="checkbox"/> Declined
Credit Limit Approved (\$):	Date: ___/___/___

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www.admarsupply.com



ROCHESTER | 1950 Brighton-Henrietta TL Rd. Rochester, NY 14623 | T: 585.272.9390 F: 585.272.9165
 BUFFALO | 1394 Military Rd. Buffalo, NY 14217 | T: 716.873.8000 F: 716.873.8455
 SYRACUSE | 6014 Drott Dr. E. Syracuse, NY 13057 | T: 315.433.5000 F: 315.431.0548
 ALBANY | 878 Old Albany Shaker Rd. Latham, NY 12110 | T: 518.690.0750 F: 518.690.0757
 BINGHAMTON | 449 Commerce Rd. Vestal, NY 13850 | T: 607.798.0333 F: 607.798.0833

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The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex marital status, age (provided the applicant has the capacity to enter into a binding contract), because of all or part applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with the law in the Federal Trade Commission, Equal Opportunity, Washington, DC 20580.