



**Annapolis Paint Eastern Shore**  
**419 E. Dover St**  
**Easton, MD 21601**  
**410-820-4442**  
**1-800-458-8472**

**Credit Application**

Legal Business Name \_\_\_\_\_ Fed I.D. or SSN# \_\_\_\_\_

Trading as \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Fax# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Owner \_\_\_\_\_ Manager \_\_\_\_\_

Type of Organization (please circle one)    Proprietorship    Partnership    Corporation

How long in business? \_\_\_\_\_ State of Incorporation \_\_\_\_\_

Is P.O. required?    Yes     No     Estimated monthly purchases \_\_\_\_\_

Is account tax exempt    Yes     No     Tax exempt number \_\_\_\_\_

**Bank Reference**

Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Account No. \_\_\_\_\_

**Credit Reference**

Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Terms are net 30 days from end of month. A service charge of 2.0% per month (24% per annum) will be assessed against any balance not paid within these terms. In making this application we hereby authorize you to investigate the credit references we have listed. Applicant agrees to pay all costs of collections, including court costs and reasonable attorney fees. We understand the terms as stated and agree to abide by them.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_ (Title) \_\_\_\_\_

In consideration of extending credit we, the undersigned, do hereby jointly and severally unconditionally guarantee payment of this account.

Guarantor(s) Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

Guarantor(s) Name(s) (please print) \_\_\_\_\_

**Return to 419 E. Dover St, Easton, MD 21601 or Fax to 410-822-7008**