



# Credit Application

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Applications must be dated, signed, and all information completed. If purchases are tax exempt, please attach a signed tax certificate for our records. All of the information provided will be held in the strictest confidence.

Full Legal Business Name: \_\_\_\_\_

DBA (if different): \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Tel #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Contact Name and Title: \_\_\_\_\_

Federal Tax ID or Social Security Number: \_\_\_\_\_

Date Business Established: \_\_\_\_\_ Terms Applying For: Net 30

Form of Ownership: \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation

Are you sales Tax Exempt? \_\_\_\_\_ yes (attach copy) \_\_\_\_\_ no

Have you ever had credit with us before? \_\_\_\_\_ yes \_\_\_\_\_ no

Names and addresses of principals:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trade References:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

\_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

## **Century Bathworks, Inc.**

250 Lackawanna Ave, West Paterson, NJ 07424 ■ 973 785 4290 ■ 800 524 2578 ■ fax 973 785 0777  
www.centurybathworks.com



# Credit Application

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

## Bank References:

Account #: \_\_\_\_\_ Tel: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Name of Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Account #: \_\_\_\_\_ Tel: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Name of Bank: \_\_\_\_\_

Address: \_\_\_\_\_

I represent that the above information is true and is given to induce Century Bathworks Inc. to extend credit to the applicant. My company and I authorize Century Bathworks Inc. to make such credit investigation as Century Bathworks, Inc. sees fit, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to Century Bathworks, Inc. any and all information concerning the financial and credit history of my company and myself.

In order to induce Century Bathworks, Inc., to extend credit to \_\_\_\_\_ (Company), I hereby guarantee the payment of any account due or to become due by said company to Century Bathworks, Inc., including attorney's fees incurred, if any, for the collection of such amount. This guarantee shall include past due balances, current balances, and future sales and credit hereafter extended and fees hereafter incurred. This guarantee shall remain in full force and effect until revoked in writing by registered mail – return receipt. Revocation of this guarantee does not relieve obligation to pay balances owed whether past due or current.

Signature: \_\_\_\_\_ Name (Please print): \_\_\_\_\_

Social Security Number/FIN: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

**Personal Guarantee:** If the credit customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased by the corporation.

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