



APPLICATION FOR CREDIT

Company Name: _____

Address _____

Telephone # _____ **Fax #** _____

Officers of Company _____

Date Established: _____

Bank Reference:

Bank Name _____
Telephone Number: _____
Contact Name: _____

**JM Supply delivers all invoices electronically
Please provide an email address or fax number**

AP Contact Name: _____

AP Telephone Number: _____

AP Email address: _____

Fax Number: _____

Taxable _____ **Tax Exempt** _____ **FEIN#** _____

Please include copy of Texas Resale Certificate if you are exempt.

PO Number required: Y _____ N _____ TERMS: Net 30 Days



Credit References:
All Credit information is sent by email or fax.
Please provide address or number

Company _____

Phone _____ **Fax** _____

Email: _____

Company _____

Phone _____ **Fax** _____

Email: _____

Company _____

Phone _____ **Fax** _____

Email: _____

Company _____

Phone _____ **Fax** _____

Email: _____

**We certify that the statements listed are correct and we hereby
agree to pay according to the terms listed above.**

Signature _____ **Date** _____