



CREDIT APPLICATION

FRANK J. FAZZIO & SONS, INC.
458 ELWOOD AVENUE
PITMAN, NJ 08071-1294

P 856-589-3760 F 856-589-2655

CREDIT AMOUNT	DATE OPENED

INDIVIDUAL OR COMPANY NAME _____

BILLING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

OFFICE ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

OFFICE PHONE NUMBER _____ FAX _____ HOME PHONE _____ MOBILE PHONE _____

EMAIL ADDRESS _____ WEBSITE URL _____

SOLE PROPRIETORSHIP _____ PARTNERSHIP _____ CORPORATION _____ LLC _____

IF CORPORATION: STATE OF INCORPORATION _____ FEDERAL TAX ID NUMBER _____

LIST OF PRINCIPALS/OWNERS

NAME _____ ADDRESS _____ SOCIAL SECURITY NUMBER _____

NAME _____ ADDRESS _____ SOCIAL SECURITY NUMBER _____

NAME _____ ADDRESS _____ SOCIAL SECURITY NUMBER _____

HAVE YOU EVER OPERATED UNDER ANY OTHER NAME? _____ HAVE YOU OR YOUR BUSINESS EVER CLAIMED BANKRUPTCY? _____

ARE THERE ANY LAWSUITS, LIENS OR JUDGEMENTS EXISTING AGAINST YOUR FIRM? _____ IF SO, PLEASE EXPLAIN: _____

HOW LONG HAVE YOU BEEN IN BUSINESS? _____ TYPE OF BUSINESS: _____

TAX STATUS TAXABLE: _____ NON-TAXABLE / TAX EXEMPT ID OR RESALE NO. (INCLUDE TAX EXEMPT CERT.) _____

AMOUNT OF CREDIT REQUESTED _____ BANK NAME _____ BANK PHONE _____ REPRESENTATIVE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

ACCOUNT NO.(S) _____ ACCOUNT NAME _____

ACCOUNT NO.(S) _____ ACCOUNT NAME _____

PLEASE LIST FOUR MATERIALS SUPPLIERS (NO PERSONAL REFERENCES) INCLUDE AT LEAST (1) ONE READY MIX SUPPLIER

NAME _____ ADDRESS _____ FAX NUMBER _____

NAME _____ ADDRESS _____ FAX NUMBER _____

NAME _____ ADDRESS _____ FAX NUMBER _____

NAME _____ ADDRESS _____ FAX NUMBER _____

NAME _____ ADDRESS _____ FAX NUMBER _____

ALL TERMS AND CONDITIONS ARE SET FORTH ON THE REVERSE SIDE ARE A PART OF THIS CREDIT APPLICATION AND MUST BE SIGNED BY AUTHORIZED OFFICERS OF THE COMPANY OR FOR PERSONAL ACCOUNTS BY THE INDIVIDUAL





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TERMS & CONDITIONS: IN CONSIDERATION OF THE EXTENSION OF CREDIT, THE UNDERSIGNED AGREES TO THE FOLLOWING TERMS FOR EACH AND EVERY SALE.

Intending to be legally sound, the undersigned certifies all information on this application is true and correct and is being provided to induce request for Frank J. Fazio & Sons, Inc. to extend credit in reliance upon that information. In consideration of such extension of credit, I/we agree to pay for all invoices within the terms and conditions of each sale.

PAYMENT TERMS ARE NET THIRTY (30) DAYS.

Applicant agrees to pay a monthly service charge of 1 ½% monthly, 18% annually, on all sums due which have not been paid by the 30th day after the invoice date. Applicant agrees to promptly pay said service charge and any additional service charge will be due and payable every month thereafter. Waiver of any one or more service charge(s) shall not any be deemed to be a waiver of future service charges.

Should it become necessary to place the account with a collection agency or attorney, the applicant agrees to pay all collection costs and attorney fees in addition to all other sums due.

CONSENT FOR CREDIT INVESTIGATION: The undersigned applicant hereby requests credit from Frank J. Fazio & Sons, Inc. and authorizes references pertaining to credit and financial responsibility and hereby consents to and authorizes the use of banking references, trade references and a consumer credit report to determine creditworthiness, and from time to time in the continued evaluation process.

_____	_____	_____	_____
SIGNATURE	NAME (PLEASE PRINT)	TITLE	DATE

PERSONAL GUARANTEE OF BUSINESS OBLIGATIONS: In consideration of the extension of credit to the above named applicant I/We as guarantor(s) hereby jointly and severally (if there is more than one guarantor), personally, unconditionally and absolutely guarantee to you the payment of any obligation of the above business entity whenever the applicant shall fail to pay the same, guarantor agrees to pay all collections costs associated with the collection of the debt amount including reasonable attorney fees. This guarantee shall be enforceable before or after proceeding against applicant, or simultaneously here with and without resort to any security. This guarantee shall be a continuing guarantee and shall remain in full force and effect until such time as the undersigned shall notify said Frank J. Fazio & Sons, Inc. in writing that said guarantee is being terminated. Such notice of termination shall not take effect until fourteen (14) days after its receipt by Frank J. Fazio & Sons, Inc.

Guarantor(s) authorizes the creditor to utilize consumer credit reporting agencies to provide reports on said individual(s).

The undersigned fully understands the terms of this guarantee and acknowledges receipt of a copy of the same. Said notice of termination shall not release the guarantor from paying all amounts due prior to cancellation.

_____	_____	_____	_____
SIGNATURE	GUARANTOR (PLEASE PRINT)	DATE	SOCIAL SECURITY NUMBER
RESIDENTIAL ADDRESS			

_____	_____	_____	_____
SIGNATURE	GUARANTOR (PLEASE PRINT)	DATE	SOCIAL SECURITY NUMBER
RESIDENTIAL ADDRESS			