HOME OFFICE

2860 S Main Street Harrisonburg, VA 22801 (540) 433-2471 Fax: (540) 433-9553

Credit: Approved by:

Refused by:

BRANCH OFFICES

18 Haggerty Ln Suite 101 Staunton, VA 24401 (540) 885-1217 1301 Carlton Ave Charlottesville, VA 22901 (434) 979-6336

Credit Limit:

500 Crowell Ln Lynchburg, VA 24502 (434) 473-6992

APPLICATION FOR CREDIT

Please Print or Type Complete Addresses
Application Cannot be Processed Without Complete Addresses

Business Phor	ne: ()	Fax: (_)	Home: ()
Street Address	s:				
City:		State:		Zip:	
Number of Yea	ars in Business:		SSN/Ta	k ID #:	
Accounts Paya	ble Contact/Respons	sible Individual:			
Ownership:	Corporation:	Partnership:	Individual:	Check here ☐ if incorp	porated within the past 12 months
Branch Stores		Please Pro	vide List with Br	anch Locations and Comp	olete Addresses
Personal Guar	antee for Over: \$		R	equested Credit Line: \$	
Are Purchases Subject to Virginia Sales Tax?			Tax ID #/Dealer #:		
Bank or Finan	cial Institution:			Phone Number: (
Address:				The state of the s	
Dity:		State:		Zip:	
Name of Office	er or Department:		7 1000 110	Account I	Number:
Reference:				Phone Number: ()
Address:					
City:		State:		Zip:	
Reference:				Phone Number: (
Address:					
City:	Alexander of the second	State:		Zip:	
Reference:				Phone Number: (
Address:					
Ne certify that	t all information on th nt in consideration of	is form is correct and the extended credit. Check	nat we fully unde here if cash sale	rstand the credit terms of es are okay until credit ap	f 2% 10th Net 20 and agree to the
Date:		20			
				Title:	