



15 Mill Street, Sprignfield MA 01108  
Phone (413)733-6696 Fax (413)733-1526

PLUMBING & HEATING  
PIPE-FITTINGS-VALVED  
PUMPS & WATER SYSTEMS  
CONTROLS & INSTRUMENTATION

**APPLICATION FOR CREDIT**

Business Name \_\_\_\_\_ Owner (Officer) Name, Title, Home Phone: \_\_\_\_\_  
Street Address \_\_\_\_\_ (1) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_ (2) \_\_\_\_\_  
Phone#( ) \_\_\_\_\_ Fax#( ) \_\_\_\_\_ Social Security# (1) \_\_\_\_\_  
Cell#( ) \_\_\_\_\_ Social Security# (2) \_\_\_\_\_  
Corporation Partnership Proprietorship Incorporated: Year \_\_\_\_\_ State \_\_\_\_\_  
Date Business Started \_\_\_\_\_ Type of Business \_\_\_\_\_ Monthly Credit Requested \$ \_\_\_\_\_  
Have you ever purchased from Bay State Plumbing & Heating Supply Co, Inc. before? When \_\_\_\_\_  
State Sales Tax: Non- Exempt Exempt **Please Attach Certificate**  
Would you like your Invoices faxed to you? Yes No  
E-Mail Address (1) \_\_\_\_\_ E-Mail Address (2) \_\_\_\_\_

**Trade References:**

Name \_\_\_\_\_ Acct # \_\_\_\_\_ Address \_\_\_\_\_ Zip \_\_\_\_\_ Fax \_\_\_\_\_ Phone \_\_\_\_\_  
(1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_

**Bank References:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Account # Type \_\_\_\_\_ Contact \_\_\_\_\_  
(1) \_\_\_\_\_  
(2) \_\_\_\_\_

I acknowledge and agree that interest at the rate of 1.5% per month will be charged on all balances remaining unpaid after days from the date said amounts are incurred. In the event of default and referral to an attorney or collection agency, I agree to pay all costs of collection including reasonable attorney fees. I understand the adobe information is given for the purpose of obtaining credit and I certify that, to the best of my knowledge, the above information is complete and accurate as of the date of the application.

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

In consideration for Bay State Plumbing & Heating Supply Co, Inc. selling merchandise on credit to the above signed, the undersigned hereby personally guarantee the full and prompt payment for all merchandise delivered to the above signed, and the undersigned further agrees to pay all costs of collection, including reasonable attorney fees.

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

Print Name \_\_\_\_\_ Date \_\_\_\_\_