

## Wayne Pipe & Supply, Inc.

6040 Innovation Blvd, Fort Wayne, Indiana 46818

Telephone: (260) 423-9577 ♦ ♦ Fax: (260) 422-7794 ♦ ♦ 1-800/552-3697 ♦ ♦ ar@waynepipe.com

CREDIT APPLICATION FOR A BUSINESS ACCOUNT						
Business Contact Information						
Last: First:		Middle Initial:	Title:			
Name of Business:						
Address:						
City: State	e: ZIP:	Cro	edit Limit Requested:			
	-					
	Desciones to	. f t !				
Time of Discipaces	In Business Si	nformation	Tay I D. Number			
Type of Business:			Tax I.D. Number:			
Legal Form Under Which Business Operates:  Personal Guarantee is required if anything other than	Corporation:	Partnership: □	Proprietorship: ☐	Other: 🗌		
If Division / Subsidiary, Name of Parent Company:	corporation is thetheu.					
Name and Title of Company Principals:						
Traine and Trace of Company Timespais.						
	Billing Inf	ormation				
Bill to Address:						
City: State	e: ZIP:	ļ.	voice By: Mail: 🗆	Fax: 🗆 Email: 🗆		
A/P Contact Name:		Title:	Phone:			
Fax: Ema	ail:					
Tax Exempt: Y: ☐ N: ☐ If Yes, Tax exemption	form must accompany appli	PO Required: Y:	. □ N: □			
	Bank and Tra	de References				
Bank Name:	(	Contact Name:				
Address:	Phone: Fax:					
	Email:					
	Account Type: Checking:	Savings: □	Account Number:			
Company Name:	Company Name:		Company Name:			
Address:	Address:		Address:			
Date Opened: Acct Number:	Date Opened:	Acct Number:	Date Opened:	Acct Number:		
Contact:	Contact:	/teet rumber.	Contact:	Acce Hamber.		
Email:	Email:		Email:			
Fax:	Fax:		Fax:			
			Phone:			
Phone:	Phone:		Priorie:			
	Agree	ment				
1. All invoices are to be paid 30 days from the date of the invoice.						
2. All Past due amounts will incur interest at a rate of 18% per annum. In addition, you agree to reimburse Wayne Pipe & Supply,						
Inc. for any and all costs of collection including, but in no way limited to, attorney fees.						
3. By submitting this application, you declare that the above information is true, correct and complete. You authorize Wayne Pipe						
& Supply, Inc. to make any credit inquiries as it sees fit, including contacting the references that you have supplied and obtaining						
credit reports. You authorize all trade references, banks and credit reporting agencies to disclose to Wayne Pipe & Supply, Inc.						
any and all information concerning the financial and credit history of your company.						
Signatures						
Signature: Signature:						
tle: Date:		Title:	Date:			



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## **Personal Guarantee**

If credit is granted, I/we agree to the above terms and the undersigned is/are responsible for payment of the account, including any service charges. And I/we do further agree if my/our account must be placed in the hands of an attorney for collection or if collection is made through probate proceedings, I/we will pay a reasonable amount of attorney's fees on both the principal balance and the service charge. Accounts are due and payable within 30 days. Interest will accrue on all past due amounts at a rate of 18% per annum.

In consideration of extending credit to the above firm at my/our request, I/we hereby personally guarantee the payment of all of their obligations to you until withdrawn by me/us by certified mail.

Signatures							
Print Full Name:	Date of Birth:	SSN:	·				
Signature:	Date:						
Print Full Name:	Date of Birth:						
Signature:	Date:						

Remit to Information					
Remit Payments to 6040 Innovation Blvd, Fort Wayne, IN 46818					
Payment Accepted: Cash, Check, ACH, Wire Transfer and Credit Card (Visa, Disc, Mastercard and AMEX) - ACH & Wire information available upon request					
A/R Contact information: 260-423-9577 ext. 1082 or AR@waynepipe.com					

Internal Use Only					
SR Code:	Branch:	Location:	PL #:		
FRT Code:	Carrier:	Rt:	TX Code:		
Acct #:	Terms:	Entered by:	Date:		
CL:	Approved By:	-			