

1393 State Route 45 North – PO Box 487 Mayfield, KY 42066

Phone: 270-247-5912 FAX: 800-477-7794

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

	В	JSINESS (CONTAC	CT INFO	RMATION	N			
Full Legal Name				DBA (i	DBA (if different)				
Business Billing Address				City			State	Zip Code	
Business Shipping Address				City	City State Zip Co			Zip Code	
Business Phone No.				Busine	Business Fax No.				
Principal Owner/Officer:				Title:	Title:				
Accounts Payable Contact:				Accou	Accounts Payable Email Address:				
Type of Business: ☐ Sole proprie	torship	☑ Partners	ship	☐ Corporat	ion 🗆 Li	imited Liab	ility Com	pany	
☐ Other (specify)									
☐ Resale (If so please include copy of resale certificate) ☐ Tax Exempt (If so please include copy of tax exempt form)									
Federal Tax ID # or Social Security No.			Years	Years in Business					
How do you wish to receive your invoices? ☐ Email									
	BUS	SINESS AI	ND CRE	DIT INF	ORMATIC	N			
Bank Name				Contact					
Bank Address			City			State		Zip	
Phone No. Fax No.				Email Address					
Account number Type of account			unt	☐Savings ☐ Checking			☐ Other		
BUSINESS/TRADE REFERENCES									
Company name	P			Phone	Phone				
Addrass				Fa					

Company name	Phone
Address	Fax
City, State ZIP Code	E-mail
Company name	Phone
Address	Fax
City, State ZIP Code	E-mail
Company name	Phone
Address	Fax
City, State ZIP Code	E-mail

Has your company or any company that any officer, partner, member or owner been associated with as an officer, partner, member, or owner ever had credit with us before?								
□ Yes □ No								
(If yes under what name).								
By signing below, I certify that I have the authority to bind the company to this agreement, and that I agree to Howard D. Happy Company's terms of sale (Net 30 from the date of the invoice). I also agree and accept that the credit terms maybe changed or withdrawn at the sole discretion of Howard D. Happy Company.								
The information provided is represented by the applicant to be true, correct and complete. The applicant authorized Howard D. Happy Company to investigate all credit references and other sources pertaining to our credit and financial responsibility. The undersigned authorizes its banks and trade creditors to provide Howard D. Happy Company with complete information for the purpose of credit evaluation. The applicant understands that all past due balances will be subject to a 2% finance charge on all invoices over 30 days old, with a minimum of \$1.00.								
Signature:								
Print Name:								
PERSONAL GURANTEE								
The undersigned will personally guarantee full and prompt payment of all indebtedness owed to Howard D. Happy Company. This personal guarantee shall remain in force until its revocation is received by certified mail to the address and attention of Matthew T. Cochran, Vice President. Revocation shall not affect indebtedness incurred prior to receipt of written notice. [Kentucky residents-If Guarantor is a resident of the Commonwealth of Kentucky, this guaranty shall be limited to amounts not exceeding \$ 2,500.00 for a duration of not more than 10 years from the date it is signed.]								
Signature:								
Print Name:								