

J. T. Alexander & Son, Inc.

Credit Application for a Business Account

Business Contact Information

Title:			
Company Name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP:	
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:

Business and Credit Information

Primary business address:			
City:	State:	ZIP:	
How long at current address?			
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:			
City:	State:	ZIP:	Phone:
Type of account	Account number		
Savings			
Checking			
Other			

Business and/or trade references

Company name:			
Address:			
City:	State:	ZIP:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP:	
Phone:	Fax:	E-mail:	
Type of account:			

Agreement

1. Provide Federal Tax Returns for the last TWO years.
2. Additional deposits for wholesale fuel accounts are required.
3. J. T. Alexander & Son, Inc, reserves the right to change credit terms at any time.
4. J. T. Alexander & Son, Inc. reserves the right to EFT funds for invoices.
5. All invoices are to be paid 10 days from the date of the invoice.
6. By submitting this application you authorize J.T. Alexander & Son, Inc. to make enquiries about your credit including but not limited to enquiries to the banking, savings, business, and/or trade references you have supplied and .

Signatures

Title: Date:	Title: Date:
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