## May be faxed to: 631-533-9900, emailed to: credit@marjamap.com or mailed to: 885 Conklin St., Farmingdale, NY 11735

HARTFORD, CT NEWARK, DE FT MYERS, FL JACKSONVILLE, FL MIAMI, FL ORLANDO, FL WALDORF, MD HARWICH, MA STONEHAM, MA MANCHESTER, NH 860,953,7333 302,283,1020 239,938,0162 904,288,0440 305,650,8900 407,872,7779 301,396,4158 508,432,4200 781,279,7900



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609,407,1234 732,938,5005 518,435,1111 718,388,6465 631,249,4900 631,477,0400 631,298,8559 845,565,6500 215,338,9900

\_\_\_Date: \_\_\_\_\_

Drywall - Acoustics - Lumber - Power Tools - Flooring - Adhesives - Doors - Windows - Insulation - Siding - Roofing

## CREDIT APPLICATION AND AGREEMENT Company/Account Name: \_\_\_\_\_\_Sales Rep: \_\_\_\_\_ \_City: \_\_\_\_ State: Zip: \_\_\_\_\_ Fax:\_\_\_\_ Phone: Personal Email: Type of business: \_\_\_\_\_Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ Federal ID: \_\_\_\_\_ Years in business: \_\_\_\_\_ Are you tax exempt? \_\_\_\_ If yes, please forward tax exempt forms Are your jobs bonded? If yes, which bonding company do you use? Have you ever filed bankruptcy? \_\_\_Yes \_\_\_No Do you have any liens or judgments against you? \_\_\_\_ Accounts Payable bookkeeper's name: \_\_\_\_\_ Cell: \_\_\_\_ Email: \_\_\_\_ \_\_\_\_\_ Cell:\_\_\_\_\_ Email: \_\_\_\_\_ Purchasing agent's name: PRINCIPAL'S / OWNER'S INFORMATION \_\_\_\_\_ Name: \_\_\_\_\_ Address: \_\_\_ Address: \_\_\_\_\_City, State, Zip: \_\_\_\_\_ City, State, Zip: Home Phone: \_\_\_\_\_\_ Cell: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Social Security #\_\_\_\_\_Social Security # \_\_\_\_\_ Date of Birth: \_\_\_\_\_Spouse's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_ Do you own or rent your home\_\_ \_\_\_\_ Do you own or rent your home Signature of person completing on behalf of applicant CREDIT TERMS AND CONTINUING PERSONAL GUARANTEE OF PAYMENT For the purpose of inducing the extension of credit from MARJAM to the applicant identified above and its successors and or assign, the undersigned warrants and represents that the statements made and information provided herein are complete, correct and true with the intent that strict reliance be placed thereon in extending and continuing credit to the above applicant. In order to further induce you to sell merchandise on credit, the undersigned jointly and/or severally unconditionally and irrevocably guarantees the full and prompt payment of any indebtedness of the applicant to MARJAM including finance/late charges in the amount of 1.5% per month. In the event that legal action is instituted to enforce payment of the amount due pursuant to such extension of credit, the undersigned jointly and severally guarantees to be liable for all costs of collection, including attorney's fees and court costs involved in collecting such debt. In the event of non-payment by the referenced business, MARJAM will be entitled to payment from the undersigned or his heirs, without prior demand or notice and without proceeding against the applicant first. The undersigned states that I/WE have read and are familiar with the terms and conditions of sale and I/WE agree to be bound by them. The applicant agrees that at MARJAM'S option, jurisdiction over any and all disputes shall repose in Suffolk County, State of New York, I/WE agree that during review of this agreement, MARJAM may obtain a consumer report on me/us and at any time in the future obtain additional consumer reports to review my/our account. For the purpose of this Credit Application and Agreement facsimile and or email signatures shall in all respects be equivalent to and constitute original signatures and an original EXECUTION OF THIS INSTRUMENT CONSTITUTES A PERSONAL GUARANTEE ON MY/OUR PART(S).

Spouse Name: \_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_ Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

Spouse Name: Signature: \_\_\_\_\_\_\_

\_\_\_Signature:\_\_\_

A copy of a valid driver's license MUST accompany all applications for credit This credit application applies to Marjam Supply of Florida, LLC

Print Name: \_\_\_

CREDIT CARDS WI	ILL NOT BE ACCEPTED AS OF YOUR MOST RECENT T	TRADE REFERENCES
CREDIT REFERENCE (1)  ADDRESS:		
TELEPHONE#:	YOUR ACCOUNT #	FAX#
CREDIT REFERENCE (2)		
ADDRESS:		
TELEPHONE#:	YOUR ACCOUNT #	FAX#
CREDIT REFERENCE (3)		
ADDRESS:		
TELEPHONE #:	YOUR ACCOUNT #	FAX#
CREDIT REFERENCE (4)		
ADDRESS:		
TELEPHONE#: #:	YOUR ACCOUNT #	FAX#
YOUR COMPANY NAME:		
WE GIVE PERMISSION TO THE PLEASE SIGN:	ABOVE VENDORS TO PROVIDE A CRE	EDIT REFERENCE ON US.
Our jobs are:Commercial What is your specialty? Roofing Dry Display MFG FurnitureOther What type of material will you be buying	eral Subcontractor Architectural V _ Residential Government/City Open ywall Acoustical General Contractor ng most? Lumber Drywall Steel Sh _ Fiber Construction Plywood Other ne? Yes No	Credit Line Requested Cabinetry Store Fixtures neetrock Ceiling
you have a credit card that we	may keep on file to charge your acc Which card: AMEX _	
es, Name on the card:	Which card. AMEA	
	Exp. Date:	

BANK NAME:

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