

ETOWAH CHEMICAL SALES & SERVICE

P.O. BOX 4416 • GADSDEN, AL 35904

PHONE (256) 547-7527 • FAX (256) 547-7555



ACCT#			:	SALESMAN #		
COMPANY NAME:						
PHONE NUMBER:	FAX NU	JMBER:	EMA	IL:		
BILLING ADDRESS:						
CITY:	COUNTY	:	STATE:		ZIP:	
SHIPPING ADDRESS:						
CITY:	COUNTY	:	STATE:		ZIP:	
DESIRED CREDIT \$:	P.O. REQUIRED:	TYPE OF ENTITY	:	YEARS IN BU	JSINESS:	
PERSON IN CHARGE OF A/P	:		PHO	NE NUMBER:		
PERSON WHO AUTHORIZES	PMTS:		PHO	NE NUMBER:		
TAX INFORMATION	N	TAX EXE	MPT#:		(NEE	D COPY ATTACHED)
WE PAY TAXES TO: STATE	CC	DUNTY:	CITY:			NONE
	TAX RATE %	TAX RATE 9	6	TAX RATE %	<u> </u>	
FOI	R PROPRIETORSHI	P, PARTNERSHIP AN	D CLOSED CO	ORPORATION:	S	
. IN <i>F</i>	MMES, RESIDENCE AD	DRESS, HOME PHONE (JF PRINCIPALS	W/OR OFFICERS	SSN	
•						
					SSN	
					-	
					SSN	
BANK REFERENCE	ACCOUNT NUMBER	CHECKING, SAVING	S, LOANS, ETC	BANK OFFICE	ER	PHONE
•						
			1			
RADE REFERENCE		ADDRESS	PHONE		CONTAC	CT OR ACCT#
•						

The undersigned certifies that the above information is true and correct and authorizes the firm to whom this application is made and any credit bureau, leasing company or other investigative agency the references, statements or other data listed or accompanying this application including but not limited to checking account, savings account, and loan account balances and furthermore authorizes all parties contracted to release such credit and financial information as requested. The undersigned agrees to pay late charges of 1.5% on all past due invoices. If this account is placed in the hands of an attorney for collection, I/We promise and agree to pay holder's reasonable attorney's fees and collection costs, even though no suit or action is filed hereon, if a suit or action is filed, the amount of such.



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INDIVIDUAL PERSONAL GUARANTY

TO: ETOWAH CHEMICAL SALES & SERVICE

	residing at							
for an in consideration of your extednir	ig credit at my request to		(NAME OF COMPANY)					
			(hereinafter referred to as the "C	ompany"), o				
which I am	ITLE)	, hereby perso	, hereby personally guaranteed to ETOWAH CMECIAL SALES & SERVICE, INC., F					
			I hereby agree to bind myself to pay you on dem					
which may become due to you by the	Company ehnever the Compai	ny shall fail to pay th	the same. It is understood that this guaranty shall be	a continuin				
and irrevocable guaranty and idemnity	for such indebtedness of the	Company. I do here	eby waive notice of default, non-payment and notice	e thereof an				
consent to any modification or renewal	of the credit aggreement here	eby guaranteed.						
Applicant Name:			Date:					
Witness Name:								
Address:								
City:	State:	Zip Code:						
Phone:								