

Busy Beaver Building Centers, Inc.

3130 William Pitt Way, Bldg A-6, Pittsburgh, PA 15238 U-PARC Building A-6 (P) 412-828-2323 E-mail: accountsreceivable@busybeaver.com



Store# & Location*

Commercial Sales and Services Application

Company Information*

Company Name				
Parent Company (if Subsidiary)				
Name (if self employed)		SSN		
Address City State Zip				
Bus. Phone (Include Area Code	.)			
Federal ID #				
E-Mail Address		Billing E-mail Address	S**	
Resale Cert./Sales Tax Exempt	Cert. #		(retu	rn certificate w/ application)
Existing Great Deals Card?	No Yes If Yes, Cu	stomer #		
Industry Electrical P	lumbing Contractor	Repair/Maintenance	Landscaping	Other
** If no Billing E-mail Address is	s provided, a \$2.50 fee per s	tatement will be assessed	to billing statemen	ts sent via U.S. Mail **
If Applying for Credit, Please co				
Date Credit	Purpose of account	Purpose of account		
	<u>C</u>	redit References *		
	· ·	re you purhcase using an open	account)	
		2) Name		
Address		Address		
		<u> </u>		
<u> </u>	- ()			()
	Fax (_)		Fax ((_)
Acct. #		Acct. #		
		D /	Banking Inforr	
Address		Address		
. <u></u>				
Phone ()	Fax ()	Phone ()	Eax	()
Acct. #	Fax (Acct. #		
Acc. #		ACCI. #		
	Individuals auth	orized to purchase on acc	ount *	
Print Name	Print Name	Print Nar	ne	Print Name
		•		
By signing below you are per Busy Beaver Building Centers, Inc. is willing t	mitting us to obtain necessary credit inform			
	take full responsibility for any and all charg		-	-
An 18% APR finance charge will be cal	culated on all past due balances and adde	ed to the account balance. Accounts with	h a past due balance will auto	pmatically be placed on hold and be
	uding finance charges) are paid in full. De			
This agreement may be terminated at any tim	, , ,	er, addressed to the address on the top on a the top on the top on the top of as the right to demand payment in full of		event of your account is found in default,
		5 · · · · · · · · · · · · · · · · · · ·	- F	
	(Applicant) (name) / (Title	(Co-sig	gned - Spouse)	

To assist us in processing your request, please complete all parts of this application in ink and sign at the bottom. Unsigned applications will not be processed. If you have any questions while completing this application you can call our accounting office 412-828-2323 * Indicates a required field

Approval	For Office Use Only
Date	
Approved By:	
A/R Account #	