

624



Pyramid School Supplies

 **Phone: 800.792.2644**
 **Fax: 813.621.7688**
 **Online: www.pyramidsp.com**
 **Mail: Pyramid School Products, 6510 North 54th Street, Tampa, FL 33610-1908**

CREDIT APPLICATION

Organization		Telephone		FAX	
Address			City	State	Zip
Bill To Address (If Different From Above)			City	State	Zip
Amount of Credit Requested					
Accounts Payable Contact				Telephone	
Year Established		Tax Exempt No. (Attach Copy Of Tax Exempt Certificate To This Application)			
Kind of Business			Is Business Incorporated?		

Names of Authorized Buyers on this account: _____ Name of Principal/Director/or Owner _____

1.) _____ Name _____

2.) _____ Title _____

3.) _____

Primary Bank Name _____ Branch _____

Address _____ City _____ State _____ Zip _____

Account # _____ Phone _____

Type of Account _____

List Three BUSINESS REFERENCES in the section below. (Please do not include personal references or utilities.)

Reference #1 _____

Name _____ Phone _____

Address _____ Fax _____

City/State _____ Zip _____ Account _____

Reference #2 _____

Name _____ Phone _____

Address _____ Fax _____

City/State _____ Zip _____ Account _____

Reference #3 _____

Name _____ Phone _____

Address _____ Fax _____

City/State _____ Zip _____ Account _____

PLEASE SIGN THE STATEMENT BELOW

I hereby authorize those references listed above to release information on my account/credit standing to Pyramid School Products. It is understood that the terms of sale at Pyramid are net 30 days from date of invoice and that these terms will be adhered to. We agree to pay a service charge of 2% per month, or the maximum allowed by law, on any past due balances. We also agree to pay all costs of collection, including reasonable attorney fees. By:

Name _____ Title _____ Date _____