

Commercial Account Application

<u>www.mylocalace.net</u> <u>303-761-0747</u>



| Please select the store or store | res you are ap | plying to: | | | | | | | | |
|---|------------------------------|--------------------|------------------------------|---|---------------------------------|----------------|------------|--------------------|----------|--|
| Image: Ninth Avenue AceImage: 12th AvenuHardware2640 E. 12th Avenu | | venue Ace Hardware | | re | | | | | | |
| 1030 E. 9th Avenue Denver, CO 80218 | Denver, CO 80206 4509 S Broa | | 4509 S Broad Englewood, C | | | | | | | |
| (303)831-7066 | (000)000 2001 | | (303)761-074 | | | | | | | |
| | | | | | | | Inte | ernal Use Only | | |
| | | | | | | Emp #: | | Store #: | | |
| | | | | | | Account Nur | nber: | | | |
| | | | | | | Credit Limit | Approv | /ed: | | |
| Type of account requested | | | | | | | | | | |
| Credit; credit limit requested: \$ Pay-at-purchase (cash, check, credit card) | | | | Purchase order number required Tax exempt (please attach tax exempt certificate) | | | | | | |
| BILLING INFO | DMATION (P | | | | | | | | | |
| BILLING INFO | RMATION (R | EQUIRED) | | DELIVERY/SHIPPING INFORMATION (IF DIFFERENT) Business Name | | | | | | |
| | | | | | | | | | | |
| Address | | • | - | Street Address (No P.O. box) | | | | | | |
| City | City State 2 | | Zip Code | City | lity | | | State | Zip code | |
| Phone number Fax Nur | | | | Phone Num | | | Fax Number | | | |
| Primary contact name | | | | | Primary contact e-mail address* | | | | | |
| Accounts payable contact nar | ne | | | Email address for electronic invoices (we can e-mail to multiple | | | | | | |
| | | | | addresses): | | | | | | |
| | | | | | | | | | | |
| □ *Check here if you do n | ot wish to rece | eive e-mail comm | nunication. W | l /e e-mail new | vs and offe | ers only. We n | ever re | ent or sell your a | ddress. | |
| | | BUSIN | ESS INFOR | MATION (R | EQUIRED | 91 | | | | |
| Full legal name of business | | | | Year | Years in business | | | # of Employees | | |
| Federal tax ID number | | | | D&B number | | | | | | |
| Type of business | | | | | | | | | | |
| Describe primary business activity: | | | | | | | | | | |
| | | | | | | | | | | |
| Is the business involved in any claim or lawsuit? Yes No | | | | | | | | | | |
| Has the business ever filed bankruptcy? Yes No | | | | | | | | | | |
| Is the business contemplating to file bankruptcy? Yes No | | | | | | | | | | |
| Has the business had a repossession or judgment taken against it? Yes No | | | | | | | | | | |
| Are there any delinquent taxes unpaid for the business? Yes. No PRINCIPLES OF THE BUSINESS | | | | | | | | | | |
| PRINCIPLES OF THE BUSINESS | | | | | | | | | | |
| Name: | | | | | Title: | | | | | |
| Name: | | | | | Title: | | | | | |
| | | | | | | | | | | |

| BANKI | NG & BUSINESS R | EFERENCES (ONLY | REQUIRED FOR CRED | IT APPLICATION | IS) |
|------------------------------------|----------------------|-----------------|---------------------|------------------------|-----------------------|
| Bank name | | | Contact name | | Contact phone number |
| Bank address | City | State | Zip code | | Contact email address |
| Checking account number | Averag | e balance (\$) | | Loan account number | Current balance (\$) |
| Trade reference #1 | | | Contact name | | Contact phone number |
| Address | City | State | Zip code | | Contact email address |
| Trade reference #2 | | | Contact name | | Contact phone number |
| Address | City | State | Zip code | | Contact email address |
| CREDIT TERMS AN | D AGREEMENT (AI | LL APPLICATIONS | MUST BE SIGNED EVEN | N IF CREDIT NOT | REQUESTED) |
| Terms of credit: Net 30 days. | | | | | |
| whichever is greater. Agreeme | | | 5 | | |
| that the information provided in | | | | | |
| disclosed herein. Our firm is fina | | | | will pay your invoid | ces according to your |
| terms. I/we agree to pay all serv | lice charges added o | | • | | |
| Ву | | Title | | Date | |

List of Authorized Signers

IMPORTANT: It is the account holder's responsibility to update Ace Hardware of changes to authorized account users. Changes must be submitted in-writing to the e-mail address or fax number listed at the top of this application.

Persons authorized to buy on this account; required for credit accounts, business check or p-card usage: