



114 Stackpole Street
 St. Marys, PA 15857
 (814) 781-7183 phone
 stacie.kdp@zitomedia.net

CUSTOMER CREDIT APPLICATION

Date Completed: _____ Tax Exempt: _____ (if yes include exemption certificate)

Name of Firm: _____ Phone: _____

Federal ID#: _____ Fax #: _____

Billing Address: _____
(Street) (City) (State) (Zip)

E-mail Address: _____

Name of Owner(s): _____

Corporation _____ Partnership _____ Sole Prop. _____ Date Company Started _____

Amount Requesting for Credit: _____

BUSINESS REFERENCES

1 _____
(Name) (Phone) (Email)

_____ (Street) (City) (State) (Zip)

2 _____
(Name) (Phone) (Email)

_____ (Street) (City) (State) (Zip)

3 _____
(Name) (Phone) (Email)

_____ (Street) (City) (State) (Zip)

BANK REFERENCES

_____ (Name) (Phone)

Signature of Authorized Representative Date

I authorize the release of information to a representative of Keystone Diversified Pipe Supply, Inc. to verify the credit history of above firm or individual. I agree to the following payment terms Keystone Diversified Pipe Supply, Inc.

PAYMENT TERMS NET 30 DATSM 1.5% MONTHLY FINANCIAL CHARGE AFTER 30 DAYS