

MR. PLUMBER, INC.

1413 Air Rail Ave., Virginia Beach, VA 23455

Phone: (757) 486-0786 • Fax: (757) 460-5555

Applicant's Name: _____

Business Name: _____

Business Address: _____

Phone #: _____ Cell #: _____ Fax #: _____

Type of Business: _____ No. of years in business: _____

Is Applicant: An individual _____ Corporation _____ Proprietorship _____ Partnership _____

Federal Tax ID #: _____ Tax Exempt? Y or N

Tax Exempt #: _____

CREDIT REFERENCES
Please fill this section out in full

Bank:

Name: _____

Branch Address: _____

Contact Name: _____

Phone #: _____ Account #: _____

Trade:

1) Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

2) Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

3) Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

4) Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

****CREDIT AMOUNT APPLIED FOR: \$ _____ PER MONTH****

Principle Name: _____ Phone: (home) _____

Address: _____ Phone: (Cell) _____

Person(s) Authorized to Request Service for this Customer:

Name: _____

Name: _____

Name: _____

Name: _____

I / We hereby authorize **Mr Plumber, Inc.** to obtain any credit or other information from whatever sources they may consider appropriate in order to establish and maintain a credit account in my/our name. I / We understand that all invoices are due and payable fifteen (15) days from date of invoice and personally agree to pay 1.5 % interest per month (18% per annum) or as otherwise specified from time to time on the invoices rendered, on amounts overdue, in addition to any collection, court and legal costs that may be incurred in order to collect amounts that may become delinquent hereunder in the amount of 33%. All returned checks are subject to \$50 return fee.

Signature: _____ Date: _____

Position: _____