



Hephaistos Building Supplies, Inc.

34-01 Broadway, Astoria, NY 11106 Tel. (718) 726-1527
www.hermes-hephaistos.com

CREDIT APPLICATION

For the purpose of obtaining credit from Hephaistos Building Supplies and in order to extend such credit to the undersigned, the following information is furnished to you.

Business Name: _____

Fed. Tax I.D.: _____

Business Address: _____

(Street) (City) (State) (Zip Code)

Telephone Number: _____ **Fax Number:** _____

Is Business: _____ Sole proprietorship _____ Partnership _____ Corporation _____

How long in business: _____

1. _____

(Principal) (Street) (City) (State) (Zip Code)

2. _____

(Principal) (Street) (City) (State) (Zip Code)

Bank Reference

Name _____ **Account#** _____

Address: _____ **Telephone Number** _____

Personal Contact: _____ **Fax Number:** _____

Trade References

1. _____

(Principal) (Street) (City) (State) (Zip Code)

2. _____

(Principal) (Street) (City) (State) (Zip Code)

3. _____

(Principal) (Street) (City) (State) (Zip Code)



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Credit Terms are established upon review of credit application and are as follows:
I/We certify that the above information is true and correct and I /We agree to pay **Hephaistos Building Supplies, Inc.** in accordance with the outlined credit terms. I/We authorize you to verify this information and /or obtain additional information by securing data from a credit reporting agency. I /We further agree to pay a monthly interest of 1.6% when credit terms are not met and a 25% collection charge, in the event of default, if the account is placed with an attorney or bonded collection agency.

1. Signed: _____ Title: _____ Date: _____

Print Name: _____ Social Security Number: _____

Driver's License Number: _____

2. Signed: _____ Title: _____ Date: _____

Print Name: _____ Social Security Number: _____

Driver's License Number: _____

PERSONAL GUARANTEE FOR CORPORATE ACCOUNTS

In consideration for the credit extended to the above listed corporation, the undersigned hereby guarantees and agree to be personally liable for all indebtedness incurred by the corporation. I/We further agree to pay a monthly interest of 1.6% when credit terms are not met and a 25% collection charge in the event of default, if the account is placed with an attorney or bonded collection agency.

1. Signed: _____ Title: _____ Date: _____

Print Name: _____ Social Security Number: _____

Driver's License Number: _____

2. Signed: _____ Title: _____ Date: _____

Print Name: _____ Social Security Number: _____

Driver's License Number: _____