



CREDIT APPLICATION

190 North 100 West
PO Box 815
Richfield, UT 84701

Phone (435) 896-8486
Phone 1-800-427-2706
Fax (435) 896-8961
bryce@centralelectricsupply.com

Account Name _____

Mailing Address _____ Shipping Address _____

City, State, Zip _____ City, State, Zip _____

Telephone # _____ Fax # _____ Cell # _____

e-mail address _____

Type of Business [] Corporation [] Partnership [] LLC [] Individual

Owner or Officer Name _____ Title _____

Owner or Officer Name _____ Title _____

Accounts Payable Contact _____ Title _____

Bank Reference

Name _____ City _____ State _____

Bank Officer's Name _____ Phone # _____

Type of Account _____ Account # _____

Trade References

Name _____ Address _____

City & State _____ Zip _____ Telephone _____

Name _____ Address _____

City & State _____ Zip _____ Telephone _____

Name _____ Address _____

City & State _____ Zip _____ Telephone _____

Please provide where applicable the State Construction Regeistry # _____

If you are Tax Exempt please include an exemption certificate copy with application

I authorize the named references to release to Central Electric Supply Co any and All information they have on my account. A photo copy thereof shall be as valid as the original. It is hereby certified that the statements in this application for the open account are true and complete. By the signature below, the purchaser herby agrees to pay all invoices when they become due or payable pursuant to the terms of sale. The purchaser also agrees to pay all collection cost plus reasonable attorney fees whether or not legal action is commenced for non-payment.

Name _____ Date _____

Print _____ Title _____