

FOR OFFICE USE:
TERRITORY MANAGER _____
STORE _____
CREDIT LIMIT _____
CHECK CASHING ONLY _____

NYQUIST
900 W 34th Street
Baltimore, MD 21211
Phone (410) 467-2006
Fax (410) 467-5020



CREDIT APPLICATION

The undersigned makes application to Nyquist with the understanding that any credit commitment made by Nyquist may be withdrawn by same at any time without incurring any liability or obligation to the undersigned customer.

BUSINESS FULL LEGAL NAME

DBA NAME _____ **Federal ID#** _____
Street Address _____ City _____ State _____ Zip _____
Billing Address _____ City _____ State _____ Zip _____
Business Phone () _____ Fax () _____
Nature of Business _____ Number of years _____
Estimated Monthly Purchases \$ _____ Email address _____
Type of Business: Proprietorship _____ Partnership _____ Corporation _____ State of Incorporation _____
President _____ Treasurer _____ Secretary _____
Does Your Organization Require Purchase Orders? ☐ Yes ☐ No
Sales Tax Exemption # _____ (please provide certificate if applicable)

OWNERS INFORMATION

Name _____ Social Security # _____
Address _____ PO Box _____
City _____ State _____ Zip _____
Home Phone () _____ DOB _____ Driver Lic # _____

CREDIT INFORMATION

Name of bank _____ Phone # () _____
Address _____ City _____ St _____ Zip _____
Checking Account # _____ Savings Account # _____

TRADE REFERENCES (Paint Reference Required)

1. Name _____ Ph # () _____ Account # _____
Address _____ City _____ St _____ Zip _____
2. Name _____ Ph # () _____ Account # _____
Address _____ City _____ St _____ Zip _____

VERIFICATION OF INFORMATION

The above information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Nyquist to investigate our credit history, bank references, and any information deemed necessary to extend credit.

Signature _____
Date _____

Signature _____
Date _____

PERSONAL GUARANTEE

In consideration of Nyquist or its affiliates, extending credit to the above business, I/We hereby guarantee jointly and individually, to pay for all goods, wares and merchandise supplied to me or to any of us or the above business. Also, monthly finance charges at the rate of 1.5% will be charged for any unpaid amount(s) beyond 30 days from specified times. In the event that the account is placed with a third party for collection, I/We agree to pay all costs including reasonable attorney fees, court costs and finance charges.

Signature _____
Date _____

Signature _____
Date _____