

GRAUER'S

PAINT • BLINDS • WALLPAPER

Application for Credit

Accounts Receivable Contact Info:

(717) 394-0558 ext. 101

AR@Grauerspaint.com

1941 Lincoln Highway East,

Lancaster, PA17602

www.GrauersPaint.com

Contact Name/Address:

Personal Guarantee - Legal First, MI, Last Name:			Social Security Number: (required)
Business Name:			Tax ID Number: (required for business)
Address:			PA Tax Exempt Number: (attach tax certificate)
City:	State:	Zip:	Desired Credit Limit:
Email Address:		Phone Number:	Fax Number:

Business Information: (not required for personal accounts)

Type of Business:			Years in Business:
First & Last Name: Primary Owner)			Title:
Address:			Phone Number:
City:	State:	Zip:	Email:
First & Last Name (Secondary Owner)			Title:
Address:			Phone Number:
City:	State:	Zip:	Email:

Accounts Payable:

First & Last Name: (Primary)			Phone Number:
Title:	Email Daily Invoices: YES ☐ NO ☐	Email Monthly Statements: YES ☐ NO ☐	Email:
First & Last Name: (Secondary)			Phone Number:
Title:	Email Daily Invoices: YES ☐ NO ☐	Email Monthly Statements: YES ☐ NO ☐	Email:

Financial/Supplier Reference: (Exclude Lowes, Home Depot, Sherwin Williams and PPG)

Entity Name:	Amount of Credit:	Contact Number:	Account in good standing: YES ☐ NO ☐
Entity Name:	Amount of Credit:	Contact Number:	Account in good standing: YES ☐ NO ☐
Entity Name:	Amount of Credit:	Contact Number:	Account in good standing: YES ☐ NO ☐

I certify that I am an authorized signer for the individual or entity listed above and that the information provided in this application is accurate and complete. I acknowledge that a photocopy, electronic copy, or fax of this authorization is as valid as the original. I authorize Grauer's Paint & Decorating to verify the information provided and conduct a credit review, which may include obtaining a credit report and/or credit score and contacting financial, trade, or supplier references. I authorize those parties to release relevant information and release them from liability for providing such information. I understand that this information will be used to evaluate credit eligibility and establish an appropriate credit limit. By signing this application, I accept financial responsibility for the account and agree to maintain it in good standing. Past-due balances exceeding 30 days may be subject to a service charge of 1.5% per month (18% annually), along with applicable collection costs and fees. Delinquent accounts may have charging privileges suspended or revoked and may be reported to credit agencies. I agree to promptly notify Grauer's Accounts Receivable Department of any changes to my billing address, email address, or other account information necessary to ensure accurate and timely billing.

Personal Guarantee Printed Name:	Title:
Personal Guarantee Signature:	Date: