



ABILENE PLUMBING SUPPLY CO.
 PHONE: 325-673-5001 - FAX: 325-672-0949
 P.O. BOX 125 - 742 S. 2ND ST.
 ABILENE, TEXAS 79604

BROWNWOOD PLUMBING SUPPLY CO.
 PHONE: 325-646-7500 - FAX: 325-646-7599
 3705 HWY 377 S.
 BROWNWOOD, TEXAS 76801

APSCO, INC.



Credit Application

(PLEASE COMPLETE IN FULL – INCOMPLETE DATA WILL DELAY PROCESSING OF ACCOUNT)

TYPE (CHECK ONE) Proprietorship Partnership Corporation

BUSINESS NAME _____

BILLING ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

PHONE _____ FAX _____ CELL _____ YEARS IN BUSINESS _____

EMAIL _____

ACCOUNTS PAYABLE CONTACT _____ CREDIT REQUESTED \$ _____

PRINCIPAL OWNERS ~ PARTNERS ~ OFFICERS

NAME	POSITION	ADDRESS, CITY, STATE, ZIP	TELEPHONE #

BANK REFERENCES

NAME	ADDRESS, CITY, STATE, ZIP	FAX# OR EMAIL	ACCOUNT #

TRADE REFERENCES

NAME	ADDRESS, CITY, STATE, ZIP	FAX# OR EMAIL	TELEPHONE #

PERSONAL GUARANTEE

The undersigned certifies the above information to be correct that is submitted for the purpose of obtaining credit, and agrees to all the terms and Conditions of sale of the company to whom it is submitted. In consideration of credit being extended or other financial accommodations to the firm APSCO, Inc., the undersigned, personally, jointly and severally unconditionally guarantee to APSCO, Inc. the prompt payment when due of any and all indebtedness and liabilities that are now, or at anytime or times hereafter may be or become owing to APSCO, Inc. from the above named applicant for credit. The undersigned further guarantees the payment of all interest, attorney's fees, court cost and other cost of collection which may be incurred by APSCO, Inc. All past due amounts are subject to a 1 1/2 % per month finance charge (18% per annum) or the maximum rate permitted by applicable law, whichever is less. All applicants must notify APSCO, Inc. immediately of any business name, address and/ or principal change by certified or registered mail. All charges for merchandise sold under this account are expressly payable in Abilene, Taylor County, Texas. *****TERMS ARE NET 30***** SALES TAX WILL BE BILLED UNLESS TAX EXEMPT CERTIFICATE IS ATTACHED

AUTHORIZED SIGNATURE (Name only) _____ DATE _____