



**SHERIDAN SUPPLY CORPORATION**  
*Contractor Supplies - HVAC - Plumbing Supplies*  
**CREDIT APPLICATION - Page 1**

Please Complete the Following Information

COMPANY INFORMATION		
DATE:	TAX ID NUMBER:	YRS. IN BUSINESS:
COMPANY NAME:		
DBA:		
SHIPPING ADDRESS:		
MAILING ADDRESS:		
CITY:	STATE:	ZIPCODE:
CONTACT PERSON (A/P):		
PHONE:	FAX:	
EMAIL:	WEBSITE:	
COMPANY OFFICERS		
OFFICER/OWNER:		
TITLE:	SOCIAL SECURITY #:	
OFFICER/OWNER:		
TITLE:	SOCIAL SECURITY #:	
BONDING COMPANY INFORMATION		
NAME:		
ADDRESS		
PHONE:	FAX:	
CONTACT PERSON:		
TAX EXEMPT INFORMATION ( IF APPLICABLE)		
BANKING INFORMATION		
NAME:	PHONE:	
ADDRESS:	FAX:	
CONTACT PERSON:		



**SHERIDAN SUPPLY CORPORATION**  
*Contractor Supplies - HVAC - Plumbing Supplies*  
**CREDIT APPLICATION - Page 2**

**BUSINESS REFERENCES - 3 REQUIRED**                      **REFERENCE #1**

NAME OF BUSINESS:		
ADDRESS:		
CITY:	STATE:	ZIPCODE:
PHONE:	FAX: (REQUIRED)	
CONTACT NAME:	TITLE:	
ACCOUNT #		

**REFERENCE #2**

NAME OF BUSINESS:		
ADDRESS:		
CITY:	STATE:	ZIPCODE:
PHONE:	FAX: (REQUIRED)	
CONTACT NAME:	TITLE:	
ACCOUNT #:		

**REFERENCE #3**

NAME OF BUSINESS:		
ADDRESS:		
CITY:	STATE:	ZIPCODE:
PHONE:	FAX: (REQUIRED)	
CONTACT NAME:	TITLE:	
ACCOUNT #:		

**TERMS AND CONDITIONS**

See the attached for a full list of terms and conditions of sale. The undersigned hereby agrees to be subject to the payment of terms for all invoices and further agrees that payment to Sheridan Supply Corporation is not contingent upon payment to the Buyer. The Buyer also agrees to payment terms of net thirty (30) days from the invoice date and is responsible for payment of a monthly service charge of 1.5% on all past due balances. The Buyer further agrees to pay all costs of collection, including but not limited to, attorneys' fees and court costs.

SIGNED BY:	
TITLE:	
COMPANY NAME:	
DATE:	PLEASE INITIAL THAT YOU HAVE READ TERMS AND CONDITIONS: _____