

**ST. LOUIS METRO ELECTRIC SUPPLY, INC. SALES AGREEMENT, CREDIT APPLICATION & GUARANTEE**



**ST. LOUIS OFFICE**

6801 Hoffman Ave.  
St. Louis, MO 63139  
Phone (314) 645-5656  
Fax (314) 645-9038

**BRANCHES**

Arnold  
Ballwin  
Brentwood  
Cape Girardeau  
Chesterfield  
Fenton  
O'Fallon  
St. Louis

**COMPLETE THIS FORM AND MAIL THE ORIGINAL TO THE ADDRESS LISTED ABOVE.**

Company Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Fax \_\_\_\_\_  
Officer's Name \_\_\_\_\_ Title \_\_\_\_\_  
Other Officer \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Tax ID \_\_\_\_\_

This Company is a  Corporation  Proprietorship  Partnership  Partnership  Other \_\_\_\_\_

If the company is a corporation, the exact corporate name is \_\_\_\_\_

Bank Name \_\_\_\_\_ Account Name \_\_\_\_\_ Account Number \_\_\_\_\_

Person directly responsible for payment of bills \_\_\_\_\_

Person(s) authorized to charge to account \_\_\_\_\_

Have you ever declared bankruptcy?  Yes  No

Are you currently restricted on credit from any other company due to non-payment of debt?  Yes  No

What do you anticipate your monthly credit requirements to be? \_\_\_\_\_

**TRADE REFERENCES**

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_

**St. Louis Metro Electric Supply, Inc. terms of payment for purchases on open account are:**

-2% discount on all purchases of material by customer (except on whole house builder allowances) when payment is received by the 10th day of the month following the purchase of material. Net payment of the gross amount is due after the 10th day and before the 30th day of the month following the purchase of material.

-The individual(s) whose signature(s) appear below have authorized St Louis Metro Electric Supply, Inc. to obtain customer credit history, if needed, in order to process this application.

-Applicants needing credit of \$5,000.00 or more may be required to submit additional credit information.

-The customer agrees to pay within the above terms of payment My amount owed by the customer past the 30th day following the month of purchase will be considered past due and the customer agrees to pay a service charge of 1-1/2% per month on this past due amount. Any accounts who have a past due balance can be placed on credit hold.

Signature \_\_\_\_\_ Title \_\_\_\_\_  
Date \_\_\_\_\_

## PERSONAL GUARANTEE

The individual(s) whose signature(s) appear below attest to being principal(s) in the above named application, and do hereby agree to be responsible for its indebtedness and, if approved, personally promise(s) to pay all charges accrued from the purchase of materials and/or services provided by St Louis Metro Electric Supply, Inc., d.b.a. Metro Electric Supply and/or Metro Lighting and all service charges accrued from past due balances and all attorney fees resulting from the collection of these charges. The signing of this document personally obligates the individual(s) Whether applying personally, corporately, as a sole proprietorship, or as another business entity. Credit cannot be approved unless this guarantee is signed.

Your signature _____	Partner and/or Cosigner _____
Social Security # _____	Social Security # _____
Spouse's Signature _____	Partner and/or Cosigner's Spouse _____
Social Security # _____	Social Security # _____

**Some applicants may be required to sign a promissory note (only if enclosed). This is not a reflection of your credit worthiness but is based on the applicant's lack of credit history or information and/or insufficient credit references.**

### FOR INTERNAL OFFICE USE ONLY.

Primary Sales #			
Approved	Not Approved	Credit Limit	Column
User Code	Tax Status	Customer Number	By
Notes:			