



Architectural Concrete Chemicals, LLC.

223 West Hampton Avenue
Capitol Heights, MD 20743
Tele: 301-336-9300 Fax: 301-336-6597

APPLICATION FOR CREDIT

BUSINESS INFORMATION

Name of Business: _____

Business Type: _____ Sole Proprietorship _____ Partnership _____ LLC _____ Corporation

Date Incorporated: _____ Federal ID No.: _____

Phone Number: _____ Fax Number: _____

Physical Address: _____ Mailing Address: _____

Sales Tax Exempt No.: _____ State: _____

* Please fax certificate with credit application. All sales in Washington, D.C., Maryland, and Virginia are subject to sales tax unless certificate is on file.*

BANK REFERENCES

1. Bank Name: _____ Phone Number: _____

Bank Address: _____

Account Number: _____ Account Type: _____

Date Opened: _____

2. Bank Name: _____ Phone Number: _____

Bank Address: _____

Account Number: _____ Account Type: _____

Date Opened: _____

TRADE REFERENCES

1. Name of Business: _____ Years of Credit: _____

Contact: _____ Phone Number: _____

2. Name of Business: _____ Years of Credit: _____

Contact: _____ Phone Number: _____

3. Name of Business: _____ Years of Credit: _____

Contact: _____ Phone Number: _____

This application is given for the purpose of obtaining credit. I hereby certify under the penalty of law that the foregoing is a true and accurate statement of our financial condition and give permission to Architectural Concrete Chemicals, LLC. to obtain financial/credit information from the references listed above.

Signature _____

Date _____

Print Name _____