



Electric Motor Service
 Rt. 10 Box 511
 Stollings, WV 25646
 304.752.6070 · 800.697.6070 · Fax: 304.752.6084

**APPLICATION FOR
 Open Account Credit**

PAGE ONE of Two

BUSINESS INFORMATION

Full Business Name		Federal ID#	
Contact	Name	Title	
	Phone	Ext.	Fax
Type of Business		D&B#	
Shipping Address	Street		
	City	State	Zip

BANK REFERENCE

Bank	Bank Name	Account#	
Contact	Name	Title	
	Phone	Ext.	Fax
Address	Street		
	City	State	Zip

TRADE REFERENCES (Minimum of THREE references required)

Company Name			
Contact	Name	Title	
	Phone	Ext.	Fax
Address	Street		
	City	State	Zip

Company Name			
Contact	Name	Title	
	Phone	Ext.	Fax
Address	Street		
	City	State	Zip

Company Name			
Contact	Name	Title	
	Phone	Ext.	Fax
Address	Street		
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In consideration of your having agreed at my request to supply goods and materials to

_____ (Purchaser)

on such terms and credit as well as shall be agreed between you, I/we

_____ (Guarantor/s)

hereby jointly and severally guarantee to you the payment upon demand of such sums of money as may at any time hereafter become due to you from the Purchaser in respect of goods so supplied it being understood and agreed that the liability of the Guarantor/s shall be construed as being that of the principal party and no indulgence or extension of time granted by you to the Purchaser with respect to any default by the Purchaser which might arise or with respect to any other dealings between you and the Purchaser shall in any way modify, alter vary or otherwise prejudice you or affect the liability of the Guarantor/s in any way under this guarantee. This shall be a continuing guarantee. This guarantee shall ensure to the benefit of you, your successors and assigns.

DATE the _____ day of _____, 20_____

 WITNESS

 GUARANTOR NAME (PLEASE PRINT)

 SIGNATURE

COMPLETE HOME ADDRESS OF GUARANTOR

Name _____ SIN _____

Street _____

City _____ State _____ Zip _____

Phone _____

Bank _____

Street _____

City _____ State _____ Zip _____

Acct.# _____

For Office Use Only		
Account # _____	Credit Line _____	Salesman _____
Approval Date _____	Acct. Class _____	